St. Simons African American Heritage Coalition, Inc.

MEMBERSHIP APPLICATION

Name: _________________________________     Date: ____________________
Street: _________________________________     Phone No.:________________
City: __________________________________      Zip Code: _________________
E-mail Address: ______________________________________________________

Annual Membership Fees
____ Associate       ($25.00)
____ Individual     ($35.00)
____ Family           ($50.00)
____ Lifetime         ($500.00)

Annual Business Membership Fees
____ Owners & Employees 1 - 10 ($100.00)
____ “      “ 11 - 20 ($125.00)
____ “      “ 21 - 30 ($175.00)
____ “      “ 31 - 40 ($225.00)
____ “      “ 41 - 50 ($350.00)
____ “      “ 51 & Up ($500.00)

Annual Organization (non-profit) Membership ….  $40.00

Please circle the area where you would like to volunteer.

Membership       Publicity       Fundraising
    Property Issues  Preservation

For more info contact us;
   (912) 634-0330

Make check payable to: SSAACH

RETURN TO:  SSAAH, P.O. BOX 20145, ST. SIMONS ISLAND, GA 31522

MA-06/10