

## ALDA Suncoast Membership Application

Mail To: ALDA-Suncoast of Florida  
c/o Marjie Anderson  
11651 Leda Lane  
New Port Richey, FL 34654

I would like to become a member of ALDA-Suncoast.

Date \_\_\_\_\_ I have enclosed my check for \$\_\_\_\_\_ made out to  
ALDA-Suncoast of Florida. (Please check any that apply:) Local and national  
membership \_\_\_\_ local only membership \_\_\_\_ . I am already a: lifetime local  
member \_\_\_\_ lifetime national member \_\_\_\_ . I have included a local  
donation \_\_\_\_\_.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_

State/Province \_\_\_\_\_ Zip code: \_\_\_\_\_

Telephone: \_\_\_\_\_ ( \_\_ TTY, \_\_ VP, \_\_ Voice/Captioned, \_\_ Text)

E-mail address: \_\_\_\_\_

I would like to receive email:

( \_\_ Announcements, \_\_ E-newsletter)

\_\_\_\_ I added additional information I want you to know on the reverse side.