

ANNUAL MEMBERSHIP INVOICE
ASTD Emerald Coast Chapter
Calendar Year 2010



Fill out below section as you wish for it to appear in the membership directory.

Name: _____

Title: _____

Company Name: _____

Work Address: _____

Work Phone: (____) _____ Home /
Cell Phone: (____) _____

Email: _____ National ASTD Member: ____ Yes ____ No

Annual Membership Dues for 2010:

_____ \$ 50.00 Professional _____ \$ 25.00 Student/Retiree

_____ \$175.00 Corporate** (up to 5 members) – **List Names & E-mail addresses below:**

- | | |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |
| 5. _____ | _____ |

**If this is a Corporate Membership, please fill out a membership invoice for each member. This is VERY IMPORTANT so that each receives communication from the Chapter.

Take Stock in Children: At each ASTD monthly meeting you have the opportunity to participate in *Take Stock in Children*. This is a statewide scholarship program that targets students with a financial need and a strong desire to succeed. If you wish to make a donation at this time, please include it with your check. **Amount of Contribution:** _____

Date form completed: _____ **Total Amount Remitted \$** _____

Make Checks Payable to: **ASTD Emerald Coast Chapter**

Mail Checks to: **ASTD Emerald Coast Chapter**
P. O. Box 1766
Niceville, FL 32588-1766

THANK YOU FOR YOUR MEMBERSHIP!