

West Suburban Gay Association

MEMBERSHIP FORM

WSGA, PO BOX 161, GLEN ELLYN, ILLINOIS 60138, INFO LINE (630) 861-WSGA

NEW
 RENEWAL
 CHANGE OF ADDRESS

Please Print

First Name _____ Last Name _____

Street Address _____

City, State, Zip Code _____

Phone(s) _____

E-Mail _____ Birthday (Month/Day) _____

Partner Information for Joint Memberships:

First Name _____ Last Name _____

Phone(s) _____

E-Mail _____ Birthday (Month/Day) _____

Anniversary (Month, Day, & Year) _____

Note: Our bylaws require that all members be at least 21 years old.

WSGA Member Directory (*Confidential, for WSGA members only*)

Note: You must be listed in the Directory to receive the Directory

◆ List me in the WSGA Directory? (most members are) Yes No

<i>Please check the appropriate boxes and fill in the amount(s) due</i>		
<input type="checkbox"/> \$25	Single Membership (renews each September)	\$
<input type="checkbox"/> \$45	Joint Membership (renews each September)	\$
<input type="checkbox"/> \$5	Send Printed Newsletter via US Mail	\$
TOTAL DUE		\$

Please make check payable to WSGA and mail with this form to:
WSGA, P.O. Box 161, Glen Ellyn, IL 60138

E-mail WSGA: info@WSGA.com

www.WSGA.com