

U.S. APPLICATION

MEMBERSHIP RATES	
U.S. Residents (Age 19 & over)	2 years \$39.00 1 year \$20.00
U.S. Residents (under age 19, copy of your birth certificate required for new members)	2 years \$13.50 1 year \$7.50
Life Membership	\$450
Donations (tax deductible)..... Amount of Donation: \$ _____	
To help reduce the time and expense of maintaining our subscription database - Please renew for two years at a time. Thank You !	
Please print clearly	
<input type="checkbox"/> New member <input type="checkbox"/> Renewal <input type="checkbox"/> Address change <input type="checkbox"/> Donation (tax deductible)	
Current expiration date: Month: _____ Year: _____	
Name: _____ AMA number: _____	
Address: _____	
City, State, Zip: _____	
Telephone number: _____	
Important please include your E-mail address, print clearly:	

Send all new applications (please include a copy of birth certificate for U.S. Residents under the age of 19) and renewals, with payment in US dollars, change of addresses and membership questions to:	
NFFS Membership Office J.P. Kish 22 Pine Street Homosassa FL 34446 E-mail: catroper@tampabay.rr.com	