

ROCKLAND ASTRONOMY CLUB

Membership Application

(PLEASE Print CLEARLY!)

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

E-mail Address: _____

Profession: _____

Equipment Owned

Telescope(s): _____

Binocular(s): _____

Computer: _____

Tell Us About Yourself

Other club affiliations or exposure to Astronomy? _____

How can we help you? _____

What are your astronomical interests? _____

Expertise you can offer the club? _____

ANNUAL DUES AND MAGAZINE SUBSCRIPTION PRICES

| | <u>Member Cost</u> | <u>Amount Included with Application</u> |
|--|------------------------|---|
| Student Membership (under 19) | \$ 10.00 | _____ |
| Adult Membership | \$ 20.00 | _____ |
| Family Membership | \$ 30.00 | _____ |
| Senior Citizen (age 65+) | \$ 15.00 | _____ |
| - If you wish to receive our newsletter, Distant Light, by regular mail (normal distribution is via e-mail), an additional charge is required to cover the additional costs involved. | \$ 18.00 | _____ |
| <u>Optional, at extra cost:</u> | | |
| Sky and Telescope (annual) subscription | \$ 33.00 | _____ |
| Astronomy (annual) subscription | \$ 34.00 | _____ |
| Amateur Astronomer (annual) subscription | \$ 20.00 | _____ |
| TOTAL | | _____ |

Return this application, with your check for the total amount of the options you have selected, to the Rockland Astronomy Club, att'n: Membership Services, 225 Rt. 59, Suffern, NY 10901.

If you have any questions, please check the newsletter or the website for the appropriate member of the advisory committee to contact.