



Sangamon Astronomical Society

Membership Application Form

First Name _____

Last Name _____

Street Address _____

City _____

State _____

Zip _____ - _____

Telephone _____

Email _____

Own a Telescope or Binoculars: Yes _____ No _____

Annual dues are \$45.00 to be mailed to the following address. Prorated dues are determined as follows: $\$45.00 \times \# \text{ months remaining in year} / 12 = \text{prorated dues amount}$.

Make check payable to:
Sangamon Astronomical Society

and

Mail To:
Sangamon Astronomical Society
Post Office Box 9461
Springfield, IL 62791-9461