

Membership Application Atlanta Macintosh Users Group

Atlanta Macintosh Users Group P.O. Box 15130, Atlanta, GA 30333-0130

To join, fill out and print this page, attach your check (or fill in the required credit card information), and mail to the address shown above. Membership fees are non-refundable (if for some strange reason you choose to cancel your membership).

Membership Category:		oin AMUG	Renew my membership	
	Regular Membership Membership Benefits: Admission to General Meetings; 1-year Maclanta Newsletter Subscription filled with tips, tricks and reviews; special "Members-only" discounts on hardware and software; one account with full member access to the AMUG Online Community.			
	Household Membership Requires one household member to hold Regular Membership. Additional Household Members may join for \$10 each. Membership benefits are the same as a Regular Member, except only one Newslette will be mailed per address. Those under 18 will require written parental permission before receiving an Online Community Account.			
	Student Membership Copy of student I.D. and current class regular Membership benefits are the same as a Regular Membership		n required for thi	\$25 per year. s level of membership. Membership
	Corporate Membership Includes 3 memberships. Additional menefits include: Admission to General Meetitricks and reviews; special "Members-onled full member access to the AMUG Online"	ings; 1– ly" disco	year Maclanta Nev unts on hardware	vsletter Subscription filled with tips,
Name			Company Name	(if Corporate Membership)
varric			Company Name	(ii Corporate Membership)
Address			Occupation	
City, State, Zip Code		Date of Birth (op	tional)	
lome	Phone Work Phone		E-mail Address	
			 Internet Service	Provider (ISP)?
	nt of RAM? Mac OS Version?		☐ Membership ☐ Newsletter ☐ Education	☐ Program ☐ Web Site ☐ Publicity ☐ Online Community ☐ Treasurer ☐ Secretary
Type of Internet Connection (Dial-up, DSL, Cable Modem)? Please Note Method of Payment:			Please check the to assist AMUG.	area(s) in which you would like
☐ Check (made payable to AMUG)				
☐ Please charge my Visa/Mastercard/Discover/AMEX			How did you hea	r about AMUG?
Cardholder Name (as it appears on Credit Card) Credit Card Number Expiration Date			Cardholder Signa	ature
redit	Card Number Expiration	n Date	CVSS	