

## 2010 ILSHPA/NHPA Membership Application

Adult Members \$27 Junior Members \$5

1 year Subscription to NHPA Newsline \$12

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

Zip Code (Plus Four): \_\_\_\_\_

Telephone # (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Circle One:

40'      30'      Junior      Cadet

Date of Birth \_\_\_\_\_ (Required)

Newsline \_\_\_\_\_

Total Years Membership \_\_\_\_\_

Email Address: \_\_\_\_\_

Send Application and Fees to:

**ILSHPA**

**P.O. Box 266**

**New Lenox, IL 60451-0266**

Email Address [ilshpa@comcast.net](mailto:ilshpa@comcast.net)

Stamped, self-address envelopes saves us 44 cents!