



**GHtA Inc.**

**Membership Application (please print clearly)**

**Date:** \_\_\_\_\_

**Personal Information**

Full Name: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_ *City State ZIP Code*

Home Phone: ( ) \_\_\_\_\_ Alternate Phone: ( ) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Membership fees are: Student \$30.00 (per annum)  
Individual \$60.00 (per annum)  
Family \$90.00(per annum)

Total Amount enclosed: \$ \_\_\_\_\_

Please make checks payable to **GHtA Inc.** Mail this form and check to:

**Wini King**  
**Attn: GHtA Inc.**  
**9736 East Apache Trail # 13**  
**Mesa, AZ 85207**

Contributions to GHtA Inc. are tax deductible. Tax exempt status: #74-3149448.