



MEMBERSHIP APPLICATION (Please print)

FOR OFFICIAL USE ONLY

REGION I

Grid of 10 empty boxes for official use only.

BLACKS IN GOVERNMENT GREATER BOSTON CHAPTER

c/o Sharon Edey P. O. Box 6064, Boston, MA 02114-6064

Personal Information

Name

Form fields for Name (Last, First, Initial), Home Address (Street, City, State, Zip Code), Home Telephone, and Business Telephone.

Employment Information

Employer

Form fields for Business Address (Street, City, State, Zip Code), Department, Agency, and Check One (Federal, State, County/Local).

Membership Information

Form fields for Application Type (New, Renewal), Membership Type (Regular, Associate, Lifetime), and Your email Address.

Regular Member : (Government Employee) National Membership \$35.00 Local Membership \$15.00 Total: \$50.00

Associate Member : (Non-government Employee) National Membership \$25.00 Local Membership \$15.00 Total: \$40.00

Lifetime Member: One time payment of \$300.00

Approval

Signature and Date fields.

CHANGE OF ADDRESS SECTION (Complete if applicable during renewal)

Name

Form fields for Name (Last, First, Initial), Old Address (Street, City, State, Zip Code), New Address (Street, City, State, Zip Code), Old Telephone, and New Telephone.