

My 2016 Annual Dues (PLEASE fill in ALL information.)

Membership Renewal is due by December 31, 2015. After January 1, 2016, a \$5.00 late fee will be charged.

Name: _____	Dues:	_____
AMA # _____	Family**	\$36.00 _____
Address: _____	Open	\$35.00 _____
City: _____, Zip: _____	Retiree	\$20.00 _____
Telephone: _____	Jr.(Under 19 yrs.)	\$20.00 _____
E-mail Address: _____	Newsletter Hardcopy	\$15.00* _____
	TOTAL	_____

Date of Birth: _____

**Other Family Fliers: _____

Send Newsletter by: _____ E-mail; _____ Hard Copy (Postal Mail); _____ Web Site

**Note: Members receiving the newsletter by hard copy must now pay a surcharge of \$15.00/year to cover printing and mailing costs.*

In case of emergency, please notify: _____ Relationship: _____

Home Phone: _____ Mobile/Cell Phone: _____

Mail this form to: Don Accorsi, LHMAC

104 Rocky Mountain Court

Latrobe, PA 15650-2409

Please make checks payable to LHMAC.
