



2017
Annual
Membership
Renewal

Contact Information

Please update your personal information as the data below will be published in LSRAA's APP. Most of the communication from LSRAA is via e-mail so be sure we can reach you!!!

Name: _____ Class No: _____
Business: _____
Title: _____
Mailing _____
Address: _____
Home Phone: _____
Business Phone: _____
E-mail (One please): _____ Web Site: _____

Dues

LSR Alumni Association Annual Membership Dues for 2017 Amount Due \$ 60.00

Payment Method

Check Payment also available via Paypal, visit <http://lsraa.org/join/>

Credit Card

Card Name: _____

Card Number: _____

Expiration Date: _____

Card Billing Zip Code: _____

V-Code: _____

Signature: _____

Amount Paid \$ _____

To submit by mail send your check and this form to: LSRAA, PO Box 742, Santa Rosa, CA 95402