

GNAL MEMBERSHIP APPLICATION

DUES COVER September 1, 2020 to August 31, 2021

Please print neatly! Your membership card will be mailed to you.

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Cell Phone (____) _____ Home Phone (____) _____

Please Circle Age 18-24 25-34 35-44 45-54 55+

TYPE OF MEMBERSHIP please check one Individual \$ 30 Household \$ 50 College Student \$ 5

I am a NEW GNAL Member GNAL Member Yearly Renewal

How did you hear about us? _____

DONATION

In addition to membership, I am contributing \$ _____ to GNAL Annual Appeal

Please use a separate check for payment and include Annual Appeal Donation in the memo section.

VOLUNTEER OPPORTUNITIES

GNAL depends on the participation of its members. Please consider offering your service in the following ways:
(check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> An extra set of hands when needed for an hour or two | <input type="checkbox"/> Volunteer with building team |
| <input type="checkbox"/> Provide refreshments for a meeting or show | <input type="checkbox"/> Volunteer with event team |
| <input type="checkbox"/> Assist in hanging or receiving | <input type="checkbox"/> Volunteer on a team |
| <input type="checkbox"/> Breakdown after show | <input type="checkbox"/> Teach a class or a one day studio |

Mail checks made payable to "GNAL"
along with this application form to:

GNAL

Attention: Membership

800 West Germantown Pike

East Norriton, PA 19403

Phone: 610 - 539 - 3393

www.gnal.org