



## LIFE MEMBERSHIP APPLICATION

**Please mail this application, along with your membership dues, to:**

Helen McNair Faison  
National Membership Chairperson  
1380 Faison Hwy.  
Clinton, North Carolina 28328

**Telephone:** 910/592-6060; **E-mail:** [faisonhm@aol.com](mailto:faisonhm@aol.com)

Name: \_\_\_\_\_  
Last, First Middle Initial

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: (\_\_\_\_)\_\_\_\_-\_\_\_\_ [Home] (\_\_\_\_)\_\_\_\_-\_\_\_\_ [Work]  
(\_\_\_\_)\_\_\_\_-\_\_\_\_ [Cell]

Email: \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Wedding Anniversary Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**PLEASE CHECK (/) THE APPROPRIATE LINE BELOW**

**Life Membership Plan** (Single = one person; Double = two people; and the "Plan" indicates how long you have to complete payment of the Plan):

_____	Single Plan.....	1 payment.....	\$315.00
_____	Single Plan.....	18 months.....	\$420.00
_____	Single Plan.....	2 years.....	\$525.00
_____	Single Plan.....	3 years.....	\$630.00
_____	Double Plan.....	1 payment.....	\$420.00
_____	Double Plan.....	18 months.....	\$525.00
_____	Double Plan.....	2 years.....	\$675.00
_____	Double Plan.....	3 years.....	\$840.00

**Senior Citizens/Student Plan**

**(Paid Anytime):**

\_\_\_\_\_ \$175.00

**TOTAL AMOUNT ENCLOSED:** \$\_\_\_\_\_.00

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If you are a Sampson School graduate, what year did you graduate? \_\_\_\_\_

Please **check here** \_\_\_\_\_ if this is your first time ever joining the SHSAA, Inc. (including a local chapter).

Please **check here** \_\_\_\_\_ if you are a member of a local chapter. Which one? \_\_\_\_\_

**THANK YOU FOR YOUR SUPPORT!!!**