

# CSU New Membership or Renewal Form

**Membership Fees:**

**Individual (Adult) = \$15/year; Individual (Under 18) = \$10/year; Family = \$20/year**

**Lifetime Individual = \$200; Lifetime Family = \$270**

Name \_\_\_\_\_ Additional Family Members:

Address _____	Name	Sex	Birthdate	Section
_____	_____	___	__ / __ / __	_____
_____	_____	___	__ / __ / __	_____

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone(H) \_\_\_\_\_ (W) \_\_\_\_\_

Email: \_\_\_\_\_ (optional) \_\_\_\_\_

Birthdate \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Section(s) you are joining: \_\_\_\_\_

Type:            new membership            renewal    (check one)

Subtype:        individual        family    (check one)

Year(s): \_\_\_\_\_ or            lifetime

Basic Membership     \$ \_\_\_\_\_

Additional Sections \$ \_\_\_\_\_

Total Enclosed        \$ \_\_\_\_\_ (Make checks payable to CSU)

T-Shirt Size (new members only):    S    M    L    XL        (circle one)

Please return application to: **CSU, 23 Fayette Street, Cambridge, MA 02139**