

PLEASE PRINT CLEARLY



Name: _____

New Renew

Age: (21-30) (31-40) (41-50) (50+)

Company: _____

Position: _____

Address: _____

Phone: _____ Email address: _____

I hereby consent to receive member notices via e-mail or publication on the SSYP website. **Initials** _____

What events would you like to see in the future? _____

Would you or your company like to be contacted about sponsoring or hosting a future SSYP event? _____

How did you hear about SSYP? _____

Membership dues are \$30 annually

Members will receive a discount on tickets to SSYP events.

Membership dues and event tickets sales will go toward the cost of events.

SSYP Use Only

Paid: Cash

Check # _____