

# F A E 4 - H A

## Membership Invoice

### 2009 – 2010



Please print or type and completely fill out the form. **Make checks payable to 'FAE4HA.'**

**Payment is due upon receipt, no later than Friday, Oct. 16, 2009.** Dues received after Oct. 16 will be assessed a late fee. Membership forms received after Monday, Nov. 16, will NOT be considered for membership in the 2009 – 2010 4-H year. **NOTE: Members will not be eligible to apply for awards, or hold an office within the association if payment is received after November 16.**

Thank you in advance for your cooperation.

\$210.00	<b>New Life Membership</b>
\$100.00	<b>Annual Membership Renewal Fee</b> (includes membership in NAE4HA) <b>*For dues received between: 10/16/09 – 11/2/09 a \$110.00 payment is due</b> <b>*For dues received between: 11/3/09 – 11/16/09 a \$120.00 payment is due</b> <b>*These dates are NOT POSTMARKED DATES. Payments must arrive by the deadlines listed.</b>
\$35.00	<b>New Membership</b> for first-time members (first-time membership in NAE4HA)
\$100.00	<b>Affiliate</b> (Membership for someone outside of Extension who has an interest in the youth development profession or a former member who has left Extension, or is a donor/supporter. Not eligible to vote or hold an office.)
\$35.00	<b>Student Membership</b>

Name:	Title:
Address:	County/Department:
Phone:	4H District:
Fax:	
Email:	Number of Member Years in FAE4-HA:
Membership Type (choose from list above and write out):	

**The following information is optional, but will help with your NAE4-HA member profile:**

Number of Years as a Member of NAE4-HA:		Years of Service in Extension FL: _____ Other: _____
Age:	Gender:	# of National Conferences Attended:
Level of Degree Earned	State Offices Held:	National Offices Held:
State Committee (Chair or Co-chair)	National Committee (Chair or Co-chair)	Ethnicity

Remit invoice and payment to:  
**Adam Cletzer, FAE4-HA Treasurer**  
 Indian River County Extension  
 1028 20<sup>th</sup> Place, Suite D  
 Vero Beach, FL 32960