



Membership is POWER!

Please join the NAACP today. Thank You.

HILLSBOROUGH COUNTY BRANCH NAACP (5139) MEMBERSHIP APPLICATION

(Please type or print legibly)

Date:					
Title:	Last Name:	First Name:			
Street Address:					
City:	State:	Zip Code:			
Home #:	Cell#:	Work #:			
Email Address:					
Membership Type:	<input type="checkbox"/> NEW	<input type="checkbox"/> RENEWAL	Veteran	Membership #:	

MEMBERSHIP CATEGORIES

Regular:	Lifetime Membership:
<input type="checkbox"/> ADULT \$30	<input type="checkbox"/> JUNIOR LIFE (Ages 0-13) \$100 Date of Birth: ___/___/___
<input type="checkbox"/> STUDENT \$15	<input type="checkbox"/> BRONZE LIFE (Ages 14-20) \$400 Date of Birth: ___/___/___
<input type="checkbox"/> WOMEN IN NAACP (WIN) - Any Membership plus \$10 \$10	<input type="checkbox"/> SILVER LIFE \$750
<input type="checkbox"/> CORPORATE - ANNUAL \$5000	<input type="checkbox"/> GOLD LIFE \$1500
<i>*Only available to Golden Life or Golden Heritage</i>	<input type="checkbox"/> DIAMOND LIFE* \$2500

Payment Amount:	\$	Check Number:	Money Order Number:
Please make check and money orders payable to HILLSBOROUGH COUNTY BRANCH NAACP. Mail to: Hillsborough County Branch NAACP *Membership* P.O. Box 4266 Tampa, FL 33677 or PayPal: www.naacphillsborough.org			

VOLUNTEER OPPORTUNITIES

I am interested in volunteering for the following committee (s):					
<input type="checkbox"/> ECONOMIC DEVELOPMENT	<input type="checkbox"/> MEMBERSHIP	<input type="checkbox"/> POLITICAL ACTION			
<input type="checkbox"/> EDUCATION	<input type="checkbox"/> HOUSING	<input type="checkbox"/> HEALTH			
<input type="checkbox"/> LEGAL REDRESS	<input type="checkbox"/> RELIGIOUS AFFAIRS	<input type="checkbox"/> YOUTH WORKS			
I would like to volunteer:	<input type="checkbox"/> Weekly	<input type="checkbox"/> Bi-Weekly	<input type="checkbox"/> Monthly		
The hours that I am available are:	Mon:	Tue:	Wed:	Thu:	Fri:

**** For more information, please contact the local NAACP Office at (813) 23-I-VOTE (234-8683)**

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