

MOBILE ASTRONOMICAL SOCIETY

Membership Application Form

Submit Completed Form with Dues Payment to MAS Treasurer

Name: _____

Member Since: _____

Address: _____

Dues Paid Thru: _____

City: _____ State: _____ ZIP: _____

Home Phone: (____) _____ Work phone: (____) _____

E-mail Address: _____

*I hereby certify that you may post my []name, []address, []phone []E-mail address on the **Mobile Astronomical Society web page.***

Signed: _____

MEMBER PROFILE

(Optional)

(use reverse side for any additional details or comments)

Age: _____ **Years active-in astronomy:** _____

Telescopes that you own:

Telescopes that you plan to own:

Accessories that you use and like:

Observing sites that you use:

Observing interests:

How did you hear about the MAS?