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*Detach and send in with payment*

**2019 MEMBERSHIP DUES / DONATIONS**

**HLAA WESTCHESTER**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

E-MAIL ADDRESS FOR CHAPTER NEWSLETTER AND OTHER IMPORTANT ANNOUNCEMENTS: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ CELL: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

ANNUAL MEMBER DUES (check one): \_\_\_\_ Individual (\$20) \_\_\_\_ Family (\$30)

(OPTIONAL) VOLUNTARY CONTRIBUTION TO HLAA WESTCHESTER: \$ \_\_\_\_\_

**Please make checks out to “HLAA Westchester” and mail to:**

HLAA Westchester Rockland Chapter  
PO Box 294  
Congers, NY 10920

*HLAA is a 501(c)(3) not-for-profit organization.*

*Please consult your tax advisor regarding deductibility of membership dues and contributions*