

THE NATIONAL ASSOCIATION FOR THE ADVANCEMENT OF COLORED PEOPLE

"The largest and most respected Civil Rights organization in America"

Adult Membership Application for Unit #6220

Please CIRCLE title: Mr. Mrs. Ms. Other title: _____ Date _____

Please **PRINT** your name as you prefer for it to appear on all NAACP documents including your membership card

Name _____

Zip Code _____ Address _____ Apt. # _____ City _____ State _____

Home Phone _____ Cell Phone _____ Email Address _____

Membership: New ___ Renewal ___ Membership Level _____ Membership Number _____

Payment amount: _____ Type: Cash _____ Check # _____ Money Order # _____

Name of Membership Solicitor(s): _____

Make check/money order payable to the NAACP, Unit 6220

Attach Payment to Application and Mail to NAACP, P.O. Box 200225, San Antonio, TX 78220-0225

(Regular Memberships include 1-year subscription to Crisis Magazine)

Please check Membership category desired:

REGULAR ANNUAL MEMBERSHIP

Regular Adult—\$30.00

WIN (Women in NAACP)—\$10.00
(Only available to current NAACP members)

Corporate—\$5,000.00

LIFETIME MEMBERSHIP

Silver Life— Full payment of \$750.00

Silver Life— Installment amount _____
(Minimum installment-\$75.00 annually)

Gold Life— Full payment of \$1,500.00

Gold Life— Installment amount _____
(Minimum installment-\$150.00 annually after completing Silver Life Membership)

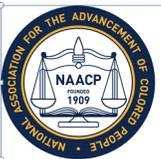
Diamond Life—Full payment of \$2,500.00

Diamond Life—Installment amount _____
(Minimum installment -\$250.00 annually after completing Silver and Gold Life Memberships)

Rev. 11 Dec 2018

Cut here for RECEIPT: _____

Membership Payment Receipt—San Antonio Branch NAACP—Unit 6220



Name: _____ Membership Type: _____

Amount Paid: _____

Payment Method: Cash: _____ Check # _____ Money Order # _____

Received by: _____ Date: _____