

or email:

ASKC GIFT MEMBERSHIP PURCHASE FORM

TO: ASKC TREASURER: treasurer@askc.org
ASKC MEMBERSHIP SECRETARY: membership@askc.org

I am purchasing a GIFT MEMBERSHIP in the Astronomical Society of Kansas City (ASKC). I will be giving this gift membership to the following person for the indicated Membership Type:

Name Of Person Who Will Be Receiving The Gift Membership:

Membership Type (Write in the type of membership):

I am including payment in below:	the amount indicated for t	the Membership Types shown
Membership Type	Membership Dues Amount	 Enclosed, please find my payment of \$ for this Gift Membership purchase. PayPal
Student	\$15	
Individual	\$50	
Family	\$60	
Senior Individual	\$45	
Senior Family	\$55	
My name:		
My Telephone Number:		

membership@askc.org