



## Join (or Renew membership) in the Tucson Amateur Astronomy Association

Please remit your completed form and check to:

Tucson Amateur Astronomy Association

P.O. Box 41254, Tucson, Arizona 85717

First Name	Last Name	Home Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email Address		
<input type="text"/>		
Home Address		
<input type="text"/>		
City	State	Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>

### Select Membership Type

- |   |           |
|---|-----------|
| <input type="radio"/> Individual  | \$30/year |
| <input type="radio"/> Individual Senior (60+)   | \$25/year |
| <input type="radio"/> Individual Teacher or College Student                                 | \$18/year |
| <input type="radio"/> Family (2 adults with minor children)                                 | \$35/year |
| <input type="radio"/> Family Senior (2 adults – age 60+)                                    | \$30/year |
| <input type="radio"/> Family Teacher  | \$23/year |
| <input type="radio"/> Youth (minor between 12 and 18 – parental/guardian written permission | \$18/year |

**Astronomical League Membership:** Your TAAA membership allows you to join the Astronomical League at the reduced rate of \$7.50/year. If you wish to add this amount to the payment

**Working with Minors Policy:** [tucsonastronomy.org/taaa-policy-on-working-with-minors](http://tucsonastronomy.org/taaa-policy-on-working-with-minors) I am aware that TAAA has guidelines for members interacting with minors. I realize I represent TAAA when engaged in TAAA events interacting with minors and agree to follow those guidelines. Specific TAAA requirements for specific activities with minors (Tucson Amateur Astronomy Association (TAAA) Policy on Working with Minors" may be found on the TAAA website and is available to all members.

I take responsibility for sharing these requirements with any adult family member who is part of my TAAA membership. I and my adult family/joint TAAA member will follow the requirements for working with minors on behalf of TAAA if we serve as TAAA volunteers when minors are involved.

I Agree: \_\_\_\_\_ Date \_\_\_\_\_