

## Membership Application/Renewal Form

Name:Street Address:						
Please provide names and mark as appropriate:						
		Relationship to Aerospace Corp.				
Name	Child?	Current Employee	Retiree	Family	None / Other	
1 Self						
2						
3						
4						
5						
6						
* Family = 2 or more people in a nuclear or immediate family  Membership Dues:  If joining as an individual - pay \$10, if as a family - pay \$20.  Send cash or make checks payable to AEA Community Impact Club  Note: Membership dues must be paid by September 1 of each year. If joining after March 1, pay only half of the full year's dues.						
Please recommend or tell us what activities you are interested in:						
Besides attending meetings and participating in Club programs, I would like to  Serve as an officer Plan events  Other ideas:						

Make checks payable to: AEA Community Impact

Mail completed form and payment to: Jennifer Lee at Mail Stop: M4-917

Questions? Visit our website at **www.aeaclubs.org/communityimpact/** or call Ingrid Hallgrimson, Community Impact! President, 310-336-0873