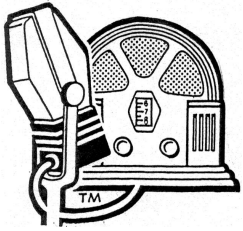


SPERDVAC Membership Renewal

Complete this form in your PDF reader and print it, or print first and fill out by hand.



Member Information

Name: _____ Membership #: _____
Address: _____ Join date (mo/yr): _____
City: _____ State: _____ Postal or ZIP code: _____
Email: _____ Home phone: _____

What programs would you like to see added to the SPERDVAC catalog?

I'd like to become more active in SPERDVAC. Here's how I might help:

Other comments or suggestions about SPERDVAC or its services:

Membership renewal: **\$20.00** per year

I'd like to make a contribution to 'Friends of SPERDVAC' in the amount of US\$ _____

in Memory of _____

Other contribution: _____

Enclose check or money order made out to "SPERDVAC" and mail it and this form to:

Post Office Box 7, Alachua, FL 32616.

SPERDVAC is a non-profit educational public benefit corporation. Your membership fee and contributions may be tax deductible. Consult with your tax advisor.