

**JAG**

**Application for Membership**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_**

Last Name First Name Middle Initial

Address

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Cell Phone Home Phone Work Phone

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Preferred Method of Contact:

E-Mail Address Work Phone Cell Phone

 Home Phone E-mail

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birth Month & Day

Creative Contributions/Special Skills/Special Interests

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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 $25.00 Annual Membership

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Signature Date

**Mail to:**

Jessica Jersey

JAG Membership/ Social Coordinator

9733 Healthway Drive

Berlin, MD 21811

jljersey@atlanticgeneral.org

410-641-9690