



Indian Association of the Space Coast Membership Form - 2015

BREVARD COUNTY, FLORIDA

Website: www.iascbrevard.com

Please make checks payable to Indian Association of the Space Coast

And mail to:

PO BOX 361184, Melbourne, FL 32936-1184

Membership Form

Name: _____
Last First Middle

Address: _____

Phone: _____
Home Business

E-mail: _____

For family membership please fill out the rest of the form

Spouse Name: _____

Children's Name: _____
Name Birthdate

Name Birthdate

Name Birthdate

Elderly Parents in Household: _____

E-mail any changes to:

iascbrevard@gmail.com

Effective 2014- All Life Members will be required to pay 1/3 of membership dues.(\$50)

Life Membership: \$1200.00

Single Membership: \$70.00

Family Membership: \$150.00

Student Membership: \$20.00