

TSRA MEMBERSHIP APPLICATION

Recruiter's Number # **R 174105**

Please Check One

New Application For Self Renewal For Self TSRA Member Number _____ Gift Membership

Please Check One:

- | | | |
|---|--|--|
| <input type="checkbox"/> Annual Membership.....\$ 25 | <input type="checkbox"/> Senior Annual (age 65+).....\$ 20+ | <input type="checkbox"/> Family Membership.....\$ 45 ** |
| <input type="checkbox"/> 3-year Membership.....\$ 65 | <input type="checkbox"/> Senior3-year Membership....\$ 55 + | <input type="checkbox"/> Annual Family Membership upgrade
Member.....\$ 20 ** |
| <input type="checkbox"/> Life Membership.....\$ 400 | <input type="checkbox"/> Senior Life (age 65+).....\$ 200+ | <input type="checkbox"/> 3-year Family Membership upgrade
for existing Life/Endowment/Benefactor
Member.....\$ 55 ** |
| <input type="checkbox"/> Conditional Life Membership...\$ * | <input type="checkbox"/> Distinguished | |
| <input type="checkbox"/> Defender Membership.....\$ 2,000 | <input type="checkbox"/> Distinguished 3-year.....\$ 55 *** | |
| <input type="checkbox"/> Benefactor Membership.....\$ 1,000 | <input type="checkbox"/> Junior (age 20 and less).....\$ 3 + | |
| <input type="checkbox"/> Endowment Membership.....\$ 700 | | |
| <input type="checkbox"/> Business/Club.....\$ 50 **** Receive \$5.00 recruiting fee for each new member sponsored | | |

Dues Rates effective 5/1/2007. Membership Dues are subject to change without notice.

* Down payment of \$40 or more, balance paid within 2 years. ** Provide (use separate sheet) names and birthdates of family members.
*** Distinguished members are those disabled in military service. + Provide birthdates for senior and junior memberships:

Name: Mr/Mrs/Ms. _____ Address: _____

City: _____ State: _____ Zip: _____ Phone () _____

YES! Place me on the email alert list! Email Address: _____

Payment Information Check Enclosed # _____ Visa MasterCard Discover AMEX

Account Number: _____ Exp. Date: _____ Signature: _____

Make checks payable to TSRA. Complete and return the application to **TSRA 314 E. Highland Mall Blvd. #300, Austin, TX 78752**
Or fax application with credit card information to 512-615-4123.