



THE SHOWMEN'S LEAGUE OF AMERICA

PO Box 64980, Chicago, IL 60664
Phone 312-332-6236 Fax 312-332-6237

Application for Membership

Mr. Mrs. Ms.: _____ hereby applies for membership in the Showmen's League of America, sponsored by the undersigned, a member in good standing.

(Sponsor) _____ (Date)

Please provide the following information:

Full Name: _____ Date of Birth: _____

Home Address _____
Street City State Zip

Home Phone: _____ Cell: _____

Email Address: _____

Send my newsletter and updates via _____ email _____ US Mail

Business Name, Address, Phone, if different: _____

Current affiliation with the industry: _____

Prior/other affiliations: _____

Country of Citizenship: _____ USA _____ Canada _____ Other (list)

Emergency Contact _____ Home/Cell Phone: _____

Home Address _____
Street City State Zip

I hereby promise that if elected to membership in the Showmen's League of America (the League) I shall support the Constitution and By-Laws of the League as they now exist and as they may hereafter be changed or amended; that I am in agreement with all the obligations and responsibilities of membership in the League that do not conflict with my duties to self, family, religious beliefs and political beliefs, and that I shall conduct myself at all times so that no discredit will be brought on the League. I further state that all statements and representations made by me on this application are true and correct to the best of my knowledge.

Signature of Applicant Date

Amount due for:

New 4-year Membership Special: \$100.00 (initiation fee waived)

New 1-year Membership: \$50.00 (\$25.00 initiation and \$25.00 first year dues)

Renewal Membership: \$25.00 per year

LIFETIME MEMBERSHIP: \$625.00

Amount received: _____ Paid By: _____ Cash _____ Check to "SLA"

Or Credit card: Type: _____ Number: _____ Exp: _____ Security Code: _____

Signature of Sponsor Date

Mail completed form and dues payment to address above.