**(2/5/2017)**

**ADS Bulk Membership Form**

Date: MM/DD/YYYY Local Society Name: Society Name Are these Memberships [ ]  US or [ ]  Canada?
Submitter’s Full Name: Enter Name. Phone: Phone Email: email
ADS Rep: Enter Name. Membership Contact: Enter Name

**General Instructions:**

* List memberships alphabetically – last name, first name. For family memberships enter both first names, and both last names if they are different.
* For multiple lines in the names, address, phone, and email entry boxes – use the Enter Key (carriage control).
* If address(es) is/are the same as last year, enter “same” and the supply zip code. For example “same – 99999”
* If entry is a snowbird membership, enter both addresses and supply dates. Also enter both phones if applicable.
* **ENTER THE TOTAL DOLLARS YOU ARE SENDING IN THE GRAY BOX.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Check if****New Address** | **1=Indiv.2=Family** | **Last Name** | **First Name** | **Address(es)** | **Phone** | **email** | **$$$** |
|  |  |  |  |  |  |  |  |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |
|[ ]  1 or 2 | Last Name | First Name | Address | Phone | email | $ |