

SANTA BARBARA MACINTOSH USERS' GROUP
MEMBERSHIP APPLICATION & RENEWAL FORM

Application Type: New Lapsed Change of info ONLY Renewal

Name _____

Street _____

City _____ Zip _____

Phone(s)/Fax _____

E-mail _____

• **Computer Level:** Check the level you enjoy at meetings
 Beginners' Intermediate Advanced

• **Computer Interests (optional):**

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> Business | <input type="checkbox"/> Internet |
| <input type="checkbox"/> Mac Basics | <input type="checkbox"/> Communications |
| <input type="checkbox"/> Multimedia | <input type="checkbox"/> Consulting |
| <input type="checkbox"/> Music/MIDI | <input type="checkbox"/> Database |
| <input type="checkbox"/> Networking | <input type="checkbox"/> Desktop Publishing |
| <input type="checkbox"/> Programming | <input type="checkbox"/> Education |
| <input type="checkbox"/> Other _____ | |

• **Volunteer Interests (optional):**

- | | |
|---|---|
| <input type="checkbox"/> Board activities | <input type="checkbox"/> Home Page |
| <input type="checkbox"/> Demos/Classes | <input type="checkbox"/> Meeting activities |
| <input type="checkbox"/> Newsletter | <input type="checkbox"/> Computer Show |
| <input type="checkbox"/> Other _____ | |

Referral Source: *If applicable, please write the name of the SBMUG member who should receive credit for your new membership.* **SBMUG Member's Name** _____

Your Signature _____ Date _____

Annual membership dues are \$25. Make checks payable to SBMUG. Send completed form & check to:

SBMUG Treasurer P .O. Box 60922 Santa Barbara, CA 93160

SBMUG By-Laws may be found on the Internet at <www.sbmug.org/moreinfo/SBMUGbylaws.html>