

2019-2020 Sequassen Alumni Association Membership Application / Renewal

Sequassen Alumni Association membership fees for the 2019-2020 fiscal years (July 1st – June 30th) are due and payable as of July 1st. Please renew / apply today to continue to receive newsletters and to give support to Camp Sequassen through the Alumni Association. **We are a 501c3 approved Association.**

Enclose Annual Dues for:

Full Member (\$25.00) Applicant must be at least 21 years of age, have been a scout, scouter, or staff member at Camp Sequassen and also have paid their dues to the Alumni Association.

Family Membership (\$50.00) All family members must live at the same address. All applicants should meet the membership requirements and also have paid their dues to the Alumni Association.

Associate Member (\$10.00) Applicant must be at least seventeen (17) years of age and less than twenty one (21) years of age and have spent at least one night at Camp Sequassen. The applicant is entitled to all rights and privileges of membership, with the exception of holding office.

Make checks payable to: **Sequassen Alumni Association Inc.**

Mail Payment & Application to:

Sequassen Alumni Association Inc. c/o Matt Balls, 110 Arlington St. West Haven, CT. 06516

To contact Matt: mdballs@snet.net

To register online go to: sequassenalumni.org Click on "Membership" Click on "Join online"

The Sequassen Alumni Association does not share personal identifiable information outside the organization.

First time applying _____ Renewal _____

Full Member (\$25) _____ Family Membership (\$50) _____ Associate Member (\$10) _____

Name _____ DOB ___/___/___

2nd Family Member _____ DOB ___/___/___

3rd Family Member _____ DOB ___/___/___

4th Family Member _____ DOB ___/___/___

Address _____

City _____ State _____ Zip Code _____

Home Phone (____) _____ Cell Phone (____) _____

Email (please print clearly) _____

Form of communication: Mailing/emails _____ Mailing Only _____ Email Only _____

Year first camped at Sequassen _____

Went to camp as (either years or √) Staffer _____ Camper _____ Scouter _____

Version 7/24/2018 SAA Official use only Card issued ___ Patch issued ___

Date ___/___/___ Amount\$ _____ Cash ___ CC ___ Check# _____ Square ___ Online ___