

Capital Area Modelers Society (CAMS)

Application for Membership

(please print)

Name: _____

Address: _____ City: _____ Zip: _____

E-mail Address: _____

Phone #: _____ IPMS/USA member? (y/n): _____

IPMS#: _____

Membership Level:

____ Adult (18+ y.o.) \$20

____ Youth (<18 y.o.) \$10

____ Family (1 Adult + children <18 y.o) \$25
