

Capital Area Modelers Society (C.A.M.S.)

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 + spouse, children <18 y.o)
\$25