



NAACP - SAINT PAUL CHAPTER #4052

375 Oxford Street North

Saint Paul, MN 55104

651-649-0520

MEMBERSHIP APPLICATION / RENEWAL

Join today and become one of the hundreds of thousands of NAACP Freedom Fighters across the globe! The work of the Association - equality and justice for all - depends on the support and participation of caring and progressive individuals like you. A stronger NAACP with a larger, more active membership is the best hope for protecting our freedom and advancing our rights.

PART 1: CONTACT INFORMATION

Prefix Mr. Ms. Miss Mrs. Dr. Rev.

First Name*

Middle Name

Last Name*

Suffix Jr. Sr. III IV V

Email Address*

Address*

City*

State*

ZIP Code*

Country: U.S.

Telephone*

Cell Phone

Are you registered to vote? Yes No

Name as you wish it to appear on your membership card:

Address at which you wish to receive your membership information and your subscription to *The Crisis Magazine* (if different from above):

Address*

City*

State*

ZIP Code*

Country: U.S.

Please complete Parts 2 & 3, on the reverse, and submit with your payment to NAACP Saint Paul Chapter 4052, Attn: Membership, 375 Oxford St. North, Saint Paul, MN 55104.

PART 2: MEMBERSHIP OPTIONS

Check here if you are a renewing member. (Member # _____)

Please choose the membership level at which you would like to join or renew. All memberships include a 1-year subscription to *The Crisis Magazine* unless otherwise indicated; fully paid Life Memberships include a 10-year subscription to *The Crisis Magazine*.

Call Lisa Tabor, NAACP Saint Paul Chapter Secretary, at 651-489-5215 with any questions or concerns.

Adult Membership Levels (21 years & older)		Youth Membership Levels (under 21 years)	
<input type="checkbox"/> Annual Regular Adult	\$30	Youth Birthdate: _____	
<input type="checkbox"/> Annual Silver Life Subscribing (ten annual installments of \$75)	\$75	<input type="checkbox"/> Annual Regular Youth	\$15
<input type="checkbox"/> Silver Life (one-time payment)	\$750	<input type="checkbox"/> Annual Youth (without <i>The Crisis Magazine</i>)	\$10
<input type="checkbox"/> Check here to be contacted about purchasing an Adult Life Membership (\$1,500 – 2,00)		<input type="checkbox"/> Check here to be contacted about purchasing a Youth Life Membership (\$100 – 400)	
<input type="checkbox"/> Corporate/ Organizational Membership		\$5,000	
Organization Name: _____			

PART 3: BILLING INFORMATION

Payment Type Check Credit Card Other _____

Card Type* Visa MasterCard American Express

Name on Card* _____

Card Number* _____

Expiration Date* _____ CSV (3-digit number on the back of your credit card)*

Billing Address* Same as Membership Address Different Address (fill-in below)*

Address _____

City _____

State _____ ZIP Code _____ Country: U.S.

Email Address (associated with the Billing Address)* _____

Submit this application and your check to: NAACP Saint Paul Chapter 4052, Attn: Membership
375 Oxford St. N, Saint Paul, MN 55104

Please make sure you have completed Part 1, on the reverse, before sending.