

Regular _____
Junior _____

APPLICATION FOR MEMBERSHIP
PENNSYLVANIA STATE SHOWMEN'S ASSOCIATION

In Applying for membership in the P.S.S.A., I do hereby agree to abide by the laws of the constitution of this Association, in so far as they pertain to me personally and to work towards those ends and purposes which will best serve the interests of all members. Date _____

Name _____ Business Name _____

2. Address _____ County _____ Twp. _____

3. City _____ State _____ Zip Code _____

4. Telephone No. _____ Email _____

5. Do you belong to any other Showmen's Club or Auxiliary? Yes _____ No _____ Date of Birth _____

6 In what capacity are you allied with Show Business?

_____ Carnival Owner	_____ Carnival Employee	_____ Food Concessions	_____ Supplier
_____ Games Concessions	_____ Entertainment	_____ Ride Owner	_____ Fair
_____ Booking Agent	_____ Allied Industry	_____ Junior Member	_____ Direct Sales

7. Have you ever been denied membership in this organization or in any other Showmen's Club or been dropped from the same? Yes _____ No _____

8. As a member, I intend to vote in the (check one) _____ Eastern Chapter _____ Western Chapter

I hereby enclose: Regular Dues in the amount of \$35.00 for the year _____
Regular dues in the amount of \$90.00 (3 years) for the years _____ to _____
Junior Membership (Age 16 & 17) \$17.50 for the year _____

DUES MUST ACCOMPANY ALL APPLICATIONS

Signature of Applicant

Recommended by (please print)

Return to:

PA State Showmen's Association

76 Maple Drive Lehighton, Pa. 18235

Approved by Board of Directors Date _____

RECEIPT FOR PSSA DUES

Date _____

Dues Year _____

Received From _____

Received by _____