

Goan Association of New York

Mail-In Membership Form

Please mail this form along with your physical check to: Goan Association of New York, P.O. Box 525234, Flushing, NY 11352. In addition, please send an email to goanyc@yahoo.com confirming that your check has been sent.

| Plan | Rate | Quantity | Total | Grand Total |
|--------------------------|------|----------|-------|-------------|
| <u>Existing Members:</u> | | | | |
| 2-Year Family | \$25 | | | |
| 2-Year Individual/Senior | \$15 | | | |
| <u>New Members:</u> | | | | |
| 1-Year Family | \$25 | | | |
| 1-Year Individual/Senior | \$15 | | | |
| 2-Year Family | \$40 | | | |
| 2-Year Individual/Senior | \$25 | | | |

Member Profile:

Name: _____

Spouse Name: _____

Email: _____

Phone: _____

Number and Age of Children:

Number _____ Ages _____

Check out our website: <http://nycgoans.com>