

## Application for Membership

New  or Renew

**Choose Type:** (check one)

- \$20.00 Individual (Annual by Calendar Year, Jan - Dec)  
 \$40.00 Organization / Business (Annual by Calendar Year, Jan - Dec)  
 \$300.00 Lifetime — Individual  
 \$500.00 Lifetime — Organization / Business

Cash  or Check  (payable to Hood Research)

### PLEASE PRINT

Date: \_\_\_\_\_

First & Last Name or Organization / Business :

\_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Birthday (Month): \_\_\_\_\_