



MEMBERSHIP APPLICATION

I hereby apply for membership in ASTRE. I pledge to conduct all my sport rocketry activities in compliance with the NAR Safety Code.

Name _____

Address _____

City _____

State _____

Zip code _____

Phone number _____

Email address _____

Date of Birth _____

NAR number? _____ Tripoli number? _____

Please check off the following as applicable:

- New membership - Renewal
- Junior member (under age 18) - \$5.00 dues
- Senior member (18 and over) - \$10.00 dues
- Family membership, above is the *primary* member - \$15.00 dues for entire family

Additional family members - no additional dues under Family membership (use back if needed)

Name _____ NAR/Tripoli# if available: _____

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Please mail your completed application(s), including a check payable to "ASTRE" to:

ASTRE Membership
c/o Alex DeMarco
43 Bloomingdale Ave
East Greenbush, NY 12061