

Membership Application

I want to be a part of the 19th District Internship Association!

Name: _____

Firm: _____

Address: _____

Phone: _____

E-mail: _____

Class Membership Desired

- \$35 *Supporter*** - will receive newsletters and invitations from the association
- \$100 *Retired Individual*** - same as a "supporter" and will receive one free invitation to the Intern Banquet
- \$150 *Individual*** - same as a "supporter" and will receive one free invitation to the Intern Banquet
- \$250 *Business I*** - company will receive the same benefits as a "supporter" and will receive two free invitations to the Intern Banquet
- \$500 *Business II*** - corporation will receive the same benefits as a "supporter" and will receive four free invitations to the Intern Banquet
- \$1,000 *Gold Sponsor*** - sponsor will receive the same benefits as a "supporter," four free invitations to the Intern Banquet, and recognition at all events

Payment Options

- Check enclosed (*Please make checks payable to the 19th District Internship Association.*)
- Invoice me

Mail this completed form to:

19th District Internship Association
P.O. Box 2731, York, PA 17405

*The 19th District Internship Association is a 501(c)3 organization.
Donations are tax deductible.*