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Join! THE SOCIETY FOR GEORGIA ARCHAEOLOGY
And Get Into Georgia's Past!
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Membership Application

Fill out the form below, and send with your check made payable to "**Society for Georgia Archaeology"** or credit card information to **SGA Treasurer, P.O. Box 693, Athens, GA 30603**. Membership runs January to December.

Chapter Information:

Please print Chapter Name:_____

Contact Name: _____

Address: _____

City:_____ State: _____ Zip Code: _____

Telephone: (___)_____Email:_____

☐ Chapter $25.00 Dues Year:_____ Members Total: _____ Amount: _____

Member Information & Membership Levels/Dues (with Chapter Discount):

Name: Address: Phone/Email:	☐ Individual $20.00 ☐ Family $25.00 ☐ Student $10.00
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