



Speech and Hearing Association of Alabama

Application for Life Membership

Any Active Member who has

attained the **age of 65**

and who has

held **SHAA membership for 10 consecutive years immediately prior to attaining age 65**

may apply for and automatically receive Life Member status through application to the Executive Board via this form.

Life Members enjoy all the rights and privileges of Active Members, and may attend Convention at half of the Active Member rates. Annual SHAA **member dues are waived.**

Name: _____

Today's Date _____ Date of Birth: _____ Age: _____

SHAA Member since _____
(Year)

Address: _____

Home Telephone: _____

Degree Held: _____

Please attach proof of age (e.g., copy of Driver's License, Passport, Birth Certificate, etc.).

Return this form to:

SHAA
Membership Department
P.O. Box 357
Normal, AL 35762

Effective March 2, 2008