



Date / /

VSBA MEMEBERSHIP FORM

First Name

Last Name

Address

City/State/Zip

Home Phone

Cell Phone

Email

Membership Level:

Individual \$12.00/YR

Family \$12.00/YR

Lifetime \$200.00

I am interested in volunteering for the following types of activities:

Leadership

Conference Planning Committee

Communications Committee

Scholarship & Grants Committee

Membership Engagement

Legislative Liaison

Outreach

Other:

Mail Checks to Scott Poling

201 Bluebird Lane

Charlotte Court House Virginia 23923