

Alaska Head Start Association
Membership Form
Membership Year November 1, 2010 through October 31, 2011

Name: _____

Program/Organization: _____

Address: _____

City, State, Zip: _____

Telephone: _____ **Fax:** _____

E-Mail Address: _____

<input type="checkbox"/>	Parent Membership	Donation Accepted
<input type="checkbox"/>	Individual Membership	\$10
<input type="checkbox"/>	Friend of Head Start	\$25
<input type="checkbox"/>	Helper of Head Start	\$50
<input type="checkbox"/>	Advocate of Head Start	\$100
<input type="checkbox"/>	Champion of Children	\$500
<input type="checkbox"/>		
	Corporate	
<input type="checkbox"/>	Silver	\$750
<input type="checkbox"/>	Gold	\$2,500
<input type="checkbox"/>	Platinum	\$5,000

Please make your check payable to:

Alaska Head Start Association

Send your membership form and check for membership to:

P.O. Box 202449
Anchorage, AK 99520-2449
(please do not send cash)

Email: akheadstart@gmail.com

AHSA Website: <http://www.akheadstart.org>