



# INTERNATIONAL SHRINE CLOWN ASSOCIATION

## MEMBERSHIP APPLICATION & CHANGE OF ADDRESS



<b>YEARLY RENEWAL</b> (Current Members Only) <b>\$20.00</b>	<b>NEW ____ or REINSTATED ____ MEMBER</b> (Required for New and past members requesting reinstatement) <b>\$25.00</b>	<b>TOTAL U.S. FUNDS</b> <b>\$ _____</b>
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***Please print legibly or you may fill this form on the computer, then print, sign and mail.***

**Subscription to clown alley magazine included in your membership**

NAME \_\_\_\_\_ YOUR CLOWN NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP/POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

PHONE NUMBER WITH AREA CODE \_\_\_\_\_ EMAIL \_\_\_\_\_

TEMPLE NAME \_\_\_\_\_ UNIT NAME \_\_\_\_\_ ISCA ID NR. (IF KNOWN) \_\_\_\_\_

***SNEAKER FUN DONATIONS SHOULD BE SEPARATED FROM DUES PAYMENTS AND NOT INCLUDED IN THE SAME CHECK***

**MAIL TO CURRENT I.S.C.A SECRETARY  
 THIS ADDRESS MAY BE FOUND AT:  
[WWW.SHRINECLOWNS.ORG/ELECTED.ASP](http://WWW.SHRINECLOWNS.ORG/ELECTED.ASP)**

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_