

MICHIGAN HANDBALL ASSOCIATION
3155 W. Big Beaver Rd., Suite 116
Troy, MI 48084-3006
MEMBERSHIP APPLICATION/ RENEWAL
(Membership year beginning Jan. 01, 2005 – Ending Dec. 31, 2005)

NAME: _____ / _____ / _____
(LAST) (FIRST) (SPOUSE/COMPANION)

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE NUMBERS: HOME: _____ / _____ / _____ BUSINESS: _____ / _____ / _____
FAX: _____ / _____ / _____ E-MAIL ADDRESS: _____

BIRTHDATE: _____ / _____ / _____ (For statistical purposes only)

AT WHAT LEVEL DO YOU RATE YOUR ABILITY? (CHECK ONE)

OPEN: ___ A+: ___ A: ___ B+: ___ B: ___ C+: ___ C: ___ NOVICE: ___ INACTIVE: ___

WHAT FACILITY DO YOU PLAY HANDBALL AT MOST? _____

TYPE OF MEMBERSHIP: (Check all that apply and include your payment) –

NEW MEMBER _____ **RENEWING MEMBER** _____

REGULAR (\$30.00) _____ You will receive your periodic magazine and directory, eligibility for MHA tournaments and free hospitality at all tournaments.

BOOSTER (\$75.00) _____ Same as above plus a one year membership or renewal to the U.S. Handball Association. The U.S.H.A. is an independent but collateral organization for the promotion of handball.

ELITE (\$210.00) _____ Same as booster plus free entry to all MHA tournaments in the membership year 2004.

MEMBER DONATION: _____

(Make your check or money order payable to the **Michigan Handball Association**)

Send completed application and funds to **MHA, 3155 W. Big Beaver, Suite 116, Troy, MI 48084**

Please fill in the name and address of anyone you think may like to join the Michigan Handball Association.

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____