GettingAhead Association

For Office Use Only
Date Received: _____
Cash Check _____
Membership Number _____

Membership Application

_____ _____ _____
Last First MI

Mailing Address _____

City _____ State _____ Zip_____

Phone_____ Email _____

Who introduced you to the GettingAhead Association? Please be specific.

_____

Please sign here:_____

I understand there is a $5.00 annual membership fee and have included a check or money order with my application.

I need the following accommodations:

- ❑ Braille
- ❑ Large Print
- ❑ Disk
- ❑ Other

I would like more information on:
- ☐ **Financial education**
- ☐ **Affordable financial services**
  - o **Checking/Savings Account**
  - o **Vehicle Loans**
  - o **Mortgages**
- ☐ **Starting a business**
- ☐ **Loans for assistive technology**

Please send your membership application and membership dues to:

GettingAhead Association
Program Director
6705 Sugarloaf Parkway, Suite 200
Duluth, GA 30097

Comments / Questions: