



THE PC USERS GROUP OF CONNECTICUT MEMBERSHIP APPLICATION

PLEASE MAKE CHECK PAYABLE TO TPCUG AND MAIL TO:

**THE PC USERS GROUP OF CONNECTICUT
4 Daniels Farm Road, # 147
TRUMBULL, CT 06611-3900**

Name:(Please print) _____

Street Address : _____

City: _____

State : _____ **Zip:** _____

Daytime Phone: () _____ **Evening Phone:** () _____

Internet E-Mail Address: _____

Web Site Address: _____

New Membership **Renewal**

How did you hear about us? _____

Annual Membership Dues:

Student \$15.00 **Individual \$30.00** **Family \$35.00** **Corporate \$100.00**

Tax Deductible Donation in addition to Dues _____

In order to help us plan for the group by assessing the computer demographics of our new members, please answer the following questions:

Areas of expertise or interest: _____

How can we serve you? _____

Signature: _____ **Date:** ___ / ___ / ___

Paid by: Check: \$ _____ **Check #:** _ **Cash: \$** ___