

## **FREE RVAS Introductory Student Memberships!**

Thanks to donations from some of our members, the RVAS is offering free introductory start-up memberships to new student members. This is a first-come-first-served offer until the donations providing these memberships run out.

Students must be currently enrolled full-time or for their next term, and must be at least 18 to apply for RVAS membership on their own. Students under age 18 will need a parent or guardian to sign in the approval space on the RVAS Free Student Membership Form.

Youth in current RVAS family memberships are not eligible for this offer.

After your introductory period, we're hoping that you'll want to continue your membership. And we've reduced our regular RVAS Student membership to just \$5.00 to make it easier to do so.

Please complete and submit the application on the next page.



**ROANOKE VALLEY ASTRONOMICAL SOCIETY**  
**Roanoke, Virginia**



**Free Introductory Student Membership Form**

Thank you for your interest in becoming a member of the RVAS. Please fill out this form. Students under age 18, please have parent/guardian sign in the space provided. Membership is subject to approval by the RVAS.  
 (PLEASE PRINT)

<b>Applicant Name:</b>	<b>Age:</b>
<b>Street Address:</b>	
<b>City, State and Zip Code:</b>	<b>Cell Phone:</b>
<b>Email Address:</b>	<b>Home Phone:</b>
<b>School Enrolled in for Current or Next Term:</b>	<b>Year/Grade Current or Next Term:</b>

Please tell us a bit about your astronomical interests and why you would like to become a member of the RVAS.

Please describe any astronomical equipment you own (manufacturer, size, type, etc.). You need not own any to join.

How did you become aware of the RVAS? If your interest in joining the RVAS was motivated by encouragement from an RVAS member, please identify the member and tell us a bit about how he/she offered such encouragement.

Yes \_\_\_ No \_\_\_ May the RVAS share your contact information with other members? If "yes," indicate any of your contact information you DO NOT want shared (for example, "Don't share street address"). Parent or guardian signature below includes approving any information release, if under age 18.

<b>Type of Membership:</b>	<b>For Family Memberships, please give each family member's name, age and relationship (wife, son, etc.) to Applicant:</b>
<b>Free Student Membership</b> (One full-time student; age 18 or over)	<b>Not Applicable</b>

*Note: Persons under age 18 may be granted Student, Individual or Family membership, provided the Parent or Guardian assumes responsibility for the actions of all such persons in connection with RVAS activities.*

**Parent/Guardian Signature (for persons under age 18):**

<b>Applicant Signature:</b>	<b>Date:</b>
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Please sign, scan and email this form to [treasurer@rvasclub.org](mailto:treasurer@rvasclub.org) or mail to:  
 RVAS Treasurer, 2607 Oregon Ave SW, Roanoke, VA 24015.  
 Visit the RVAS website at [www.rvasclub.org](http://www.rvasclub.org) for the next meeting date and other information.  
 For assistance with this form or other questions, call the RVAS Message Line, 540-774-5651.