

**APPLICATION FOR MEMBERSHIP**

Regular \_\_\_\_\_

Junior \_\_\_\_\_

**PENNSYLVANIA STATE SHOWMEN'S ASSOCIATION**

In Applying for membership in the P.S.S.A., I do hereby agree to abide by the laws of the constitution of this Association, in so far as they pertain to me personally and to work towards those ends and purposes which will best serve the interests of all members.

Date \_\_\_\_\_

1. Name \_\_\_\_\_ Business Name \_\_\_\_\_

2. Address \_\_\_\_\_ County \_\_\_\_\_ Twp. \_\_\_\_\_

3. City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

4. Telephone No. \_\_\_\_\_ Email \_\_\_\_\_

5. Do you belong to any other Showmen's Club or Auxiliary? Yes \_\_\_\_\_ No \_\_\_\_\_ Date of Birth \_\_\_\_\_

6 In what capacity are you allied with Show Business?

- |                         |                         |                        |                    |
|-------------------------|-------------------------|------------------------|--------------------|
| _____ Carnival Owner    | _____ Carnival Employee | _____ Food Concessions | _____ Supplier     |
| _____ Games Concessions | _____ Entertainment     | _____ Ride Owner       | _____ Fair         |
| _____ Booking Agent     | _____ Allied Industry   | _____ Junior Member    | _____ Direct Sales |

7. Have you ever been denied membership in this organization or in any other Showmen's Club or been dropped from the same? Yes \_\_\_\_\_ No \_\_\_\_\_

8. As a member, I intend to vote in the (check one) \_\_\_\_\_ Eastern Chapter \_\_\_\_\_ Western Chapter of the State.

I hereby enclose:

\_\_\_\_\_ 2015 Regular Dues in the amount of \$30.00

\_\_\_\_\_ 2015 Junior Membership (Age 16 & 17) \$15.00

**DUES MUST ACCOMPANY ALL APPLICATIONS**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Recommended by (please print)

Approved by Board of Directors Date \_\_\_\_\_

Please return to:  
PA State Showmen's Assoc.  
P.O. Box 5  
New Tripoli, PA 18066

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**RECEIPT FOR PSSA DUES**

Date \_\_\_\_\_

Year \_\_\_\_\_

Received from \_\_\_\_\_ Amount \_\_\_\_\_

Received by \_\_\_\_\_