



ANNUAL GROUP MEMBERSHIP FEE 2011-2012

All Amnesty groups are asked to send \$50 annually to help cover the cost of training, resource materials, and other support. Although \$50 is the minimum requested contribution, if your group has the capacity to raise additional funds, that's excellent! Group Membership Fees are due by **March 15, 2012**.

Group Information:

Group Coordinator Name: _____

School Name: _____ or Local Group #: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Payment Amount: \$ _____

Check/Money Order (Enclosed)

Credit/Debit Card Number: _____ Expiration Date: ____/____

Signature _____ (Credit/Debit Cards Only)

Group Census:

Using the space provided, please list all group members. Please submit as many forms as necessary to account for all group members and include your Group Census Forms with the Annual Group Membership Fee.

Please return the attached Invoice, Group Census form and your payment to the address below.
Checks and money orders should be made out to Amnesty International USA.

Amnesty International USA
Attention: Operations
5 Penn Plaza, 16th Floor
New York, NY 10001

PLEASE DO NOT SEND CASH.

Have questions? Contact your Regional Office (toll free) at 1.866.A.REGION (1.866.273.4466).

Thank You!

Group Census

Using the form below, please include the names and contact information for all members of your group. Please submit as many forms as necessary to account for all group members. This form should accompany the Annual Group Membership Fee.

Member Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Member Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Member Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Member Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Member Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Member Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Have more members? Feel free to make copies and send in as many forms as you need!