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: