

FLORIDA ASSOCIATION OF COMPUTER USER GROUPS, INC.
www.facug.org

Membership/Renewal Application

User Group Name:

Official Mailing Address:

City:	State:	ZIP:
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Home Page Address:

Meeting Date(s):	Number of Members	Election Month:
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President:

Address:

City:	State:	Zip:
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Phone:	E-Mail:
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User Group Representative:

Address:

City:	State:	Zip:
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Phone:	E-Mail:
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Newsletter Editor:

Address:

City:	State:	Zip:
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Phone:	E-Mail:
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Program Contact:

Phone:	E-Mail:
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Webmaster:

Phone:	E-mail:
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submitted by: _____ date: _____

Mail with \$25.00 check for membership dues to:
Florida Association of Computer User Groups, Inc.
c/o Sharon Rump, Treasurer
3328 Oakwood Blvd. S
Sarasota, FL 34237
e-mail: treasurer@facug.org