



Membership Application

NAME: MR. MRS. MS.

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

Your personal information will not be given or sold to any third party or published.

I AM CURRENTLY IN RADIO

I NO LONGER WORK IN RADIO

I HAVE NEVER WORKED IN RADIO

LIFETIME MEMBERSHIP \$40.00

**PLEASE MAIL COMPLETED FORM AND CHECK MADE PAYABLE
TO:**

GEORGIA RADIO HALL OF FAME

PO BOX 3459 - LAGRANGE, GEORGIA 30240

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