



20_____

NHPA MEMBERSHIP REPORT

TRANSMITTAL FORM

Charter Name: _____

Date: _____

Report No.: _____

Officer Submitting Report: _____

_____ Adult NHPA Full Memberships @ \$25.00	\$ _____	A
_____ Adult NHPA Provisional Memberships @ \$10.00	\$ _____	B
_____ Adult Trial Memberships		
_____ Junior NHPA Memberships @ \$5.00	\$ _____	C
_____ Lifetime Members (or NHPA Officers) Included on this Report		
TOTAL AMOUNT SUBMITTED WITH THIS REPORT	\$ _____	A + B + C

YEAR TO DATE TOTALS = NUMBERS ABOVE + PREVIOUSLY REPORTED

_____ Total Adult Full Members Reported to Date @ \$25.00	\$ _____	D
_____ Total Adult Provisional Members Reported to Date @ \$10.00	_____	E
_____ Total Adult Trial Members Reported to Date		
_____ Total Juniors Reported to Date @ \$5.00	\$ _____	F
_____ Total Lifetime Members / NHPA Officers		
TOTAL AMOUNT SUBMITTED YEAR TO DATE	\$ _____	D + E + F

Submit Report to:

**NHPA Secretary/Treasurer
P.O. Box 205
Drexel, MO 64742**

Keep a copy for your records.

Notes: _____