



Individual membership \$25 (1 vote)

Family membership – 2 **spouses** and respective youth qualifying children
18 & under \$35 (1 vote)

Youth membership 2021-FREE! **Youth MUST file form to be eligible for year-end awards.** Show points prior to filing will not count towards year end points.

Date of Birth (for Youth Membership): _____

Name: _____ APHA ID# _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ email: _____

(Membership confirmation will be via email)

Signature _____ Date _____

All members are responsible to be familiar with ESPHC membership and year end rules.

PayPal online on our website www.esphc.com

**IF YOU PAID A MEMBERSHIP IN 2020, 2021 MEMBERSHIP IS FREE!
YOU STILL MUST SEND IN A CURRENT 2021 MEMBERSHIP FORM**

Or

Mail ESPHC Memberships to:
Payable to ESPHC

Melissa Lewis
6320 Wilson Rd
Vernon Center, NY 13477

Check# _____

Cash _____