Personal	Name:	Name:			
PMUG	Family members who wish to join (\$10 each):				
	Company Name (if to be mailed to a business):				
	Mailing Address:				
	City, State and Zip:				
	Home Phone:		Business Phone:		
	Occupation:		Employer:		
	E-mail:		Mac & OS:		
Interests	☐ Business Applications ☐ Internet ☐ Tools/Techniques	☐ Games ☐ Databases ☐ CAD/CAE	☐ iPhone/iPad/iWatch☐ Graphics☐ Networks	☐ Publishing ☐ Writing ☐ Music/MIDI	
	☐ Multimedia	☐ Programming	☐ New-User Info	■ Music/Mibi	
	☐ Educational Uses☐ Photography	☐ Genealogy ☐ Digital Video	☐ Public-Domain Softv☐ Other		
Volunteer			s, meeting room set-up, t Please send me the Volunt		
Amount Due	Annual Membership \$42 - Full Membership w/journal \$10 - Each additional family member				
	Other fees 30 - Journal subscription only				
	☐ I heard about PMUG fro	orn			
Please Note: We do pmug.org/joir	not accept purchase orders. Fo	or your convenience, you	can also join or renew your r	membership online at:	
Print and fill out youMail the completed	our application with a check fo d form to:	r the payment amount.			
	mbership, 515 NW Saltzi URAGES UNLAWFUL DUPLICATION C			MEMBERS' ACTIONS.	
☐ I agree to receive	emails from PMUG relating to	o PMUG events or news.			
Signature and Da	ate		New Mem	ber 🖵 Renewal	
PMUG 🗆	☐ Store ☐ Phone Amo	unt Received:	Date Received:		
USE ONLY	Net □ Show Journ	nal Issued:	Check No:		