



**CHICAGOLAND ASSOCIATION OF S GAUGERS
MEMBERSHIP RENEWAL**

Please include your name and note any ***changes*** in information.

Name: _____ Date: _____

Home Address: _____

City: _____

State: _____

Zip Code: _____

Home Telephone: (_____) _____

E-Mail Address*: _____

- Individual Member CASG Late Dues (Calendar Year) = \$ 22.00
- Family Member (Requires an Individual Membership) = \$ 10.00

Amount Paid \$ _____ Check Cash
 Individual Family

Received by: _____

* I do not have e-mail so please mail the monthly newsletter

Visit C A S G on the Internet at:
www.casg-trains.org

Mail form & check to:

Mr. Leigh Maginniss
C A S G Treasurer
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Arlington Heights, Illinois 60004-6722