



Passport America

602 S. Main Street
Crestview, Florida 32536
800 • 681 • 6810
Fax: 850 • 398 • 6159

Membership Application

NAME: _____
ADDRESS: _____

PHONE: _____ EMAIL: _____
DATE: _____

If you wish your package mailed to an address other than your home address, add \$5.00 to your total price:

In Care of: _____
Address: _____

Choose number of years and directory type	Printed Directory	CD Rom Directory	Printed and CD Rom Directory
1 year (check one)	<input type="radio"/> \$44.00	<input type="radio"/> \$44.00	<input type="radio"/> \$59.00
2 years (check one)	<input type="radio"/> \$79.00	<input type="radio"/> \$79.00	<input type="radio"/> \$99.00
3 years (check one)	<input type="radio"/> \$109.00	<input type="radio"/> \$109.00	<input type="radio"/> \$139.00

How do you want your membership package shipped?

Type		Delivery Time	Price	Please check one
USPS 4th Class	U.S. only	4 – 6 weeks	Free	<input type="radio"/>
USPS Priority	U.S. only	3 – 5 business days	\$5.00	<input type="radio"/>
Federal Express	U.S. only, no PO Box	Guaranteed 2 days	\$20.00	<input type="radio"/>
Global Priority	Outside the U.S.	8 – 10 business days	\$10.00	<input type="radio"/>

PAYMENT INFORMATION

Please check one:

Visa Mastercard Discover Check

If payment is by credit card,

Credit Card Number: _____ Expiration Date: _____

Signature: _____ (Please sign if mailing or faxing)