

TWIN CITY ATARI INTEREST GROUP
MEMBERSHIP APPLICATION

Name: _____ Date: _____

Membership: Single ____
Family ____ names: _____

Street: _____

City: _____ State: _____ ZIP: _____

Phone: (____) _____

Computer model: 800 ____ 400 ____ other: _____

Memory size : _____ K

Do you have a disk drive? ____ (y/n) cassette? ____ (y/n)

Do you have a printer? ____ (y/n) make? _____ model? _____

Do you have a MODEM? ____ (y/n)

Do you have a subscription to Compuserve? ____ (y/n)
MICRONET number: _____

Do you have a subscription to the SOURCE? ____ (y/n)
SOURCE number: _____

What are your computer interests? _____

OPTIONAL INFORMATION

Occupation: _____

Employer: _____

Business phone: (____) _____

New membership dues are \$10/yr (single or family). Renewals are \$8/yr. Make your check payable to the Twin City ATARI Interest Group.

Dues paid: \$____ (check/cash) Date: _____ Received by: _____

Return to: TAIG
Dale Panton, Membership Chairman
3129 E. 22nd St.
Mpls. MN 55406