



Computer User Group

Membership Application

New Member

Renewal

Address Change

Date: _____

*First Name: _____ *Last Name: _____

*Address: _____

*City: _____ *State: OH *Zip Code: _____

*Phone: (_____) _____ --- _____ and/or Cell Phone: (_____) _____ --- _____

**NOTE: Phone numbers not published

*Email Address: _____ @ _____ . _____

Personal Web Page/Site/Facebook: _____

Where did you hear about CAMUG? _____

*Signature: _____

(Applicant)

Mark current operating system(s) & hardware used	
Operating System	Hardware
Windows	Laptop
Linux	Desktop
MAC	Tablet
Other:	Cell/Smart Phone
Other:	Other:

Dues are \$20/year. Send check (payable to CAMUG) or money order to:

C/A/M Users Group P.O. Box 80192 Canton, Ohio 44708