



Membership Form

Individual (\$15) _____ **Name** _____
Family (\$25) _____ **Address** _____
Gold Membership (\$100) _____ **Phone** _____
Silver Membership (\$50) _____ **email*** _____
Total enclosed _____ **Check here if this is a new address**

* Your email address is used only for informing you of events, not to be given to any third party.
Gold and Silver memberships will be listed in our February newsletter as donations to our Association.
Please write checks to Icelandic Assoc. of Northern California
c/o Adda Sigurdar 787 Southampton Drive Palo Alto, CA 94303