



MEMBERSHIP/RENEWAL FORM

[All prospective members of AAMES are required to complete this registration form. Indicate any changes; Membership runs from April 1st - March 31st.

- NEW MEMBERSHIP**
 RENEWAL
 Changes for directory?

SECTION 1: MEMBER CONTACT INFORMATION

TITLE	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Rev. <input type="checkbox"/> Dr. <input type="checkbox"/> Rev. Dr. <input type="checkbox"/> Chaplain <input type="checkbox"/> Other							
NAME (individual or Unit)								
ADDRESS 1					MOBILE PHONE			
ADDRESS 2					PRIMARY EMAIL			
TOWN/CITY/ZIP CODE					SECONDARY EMAIL			
NAME OF UNIT CONTACT					Position of Unit Contact			

SECTION 2: MEMBERSHIP TYPE AND PAYMENT DETAILS

MEMBER TYPE	DESCRIPTION	MEMBERSHIP DUES (Annual)	Please Check
FULL	Adult AME members who are active in Scouting	\$40	
ASSOCIATE	Associate membership is open to any individual member of an AME Church who is not in Scouting or any individual who is not a member of an AME Church. (restricted from voting, holding office or chairing committees)	\$20	
INSTITUTIONAL	Institutional Membership is open to ALL AME Churches that charter/sponsor a Boy Scouts of America (BSA) or Girl Scouts of the United States of America (GSUSA) Unit.	\$100	
PAYMENT METHOD	<input type="checkbox"/> Institutional Check <input type="checkbox"/> Personal Check <input type="checkbox"/> Online Payment		

SECTION 3: CHURCH/(AAMES) UNIT INFORMATION:

Please complete this section if the Scouting unit you belong to is chartered/sponsored by an AME Church or organization:

Name & Address of Church:		
Pastor:		
Episcopal District: _____	Annual Conference: _____	Presiding Elder's District: _____
Unit Type: <input type="checkbox"/> Cub Scouts <input type="checkbox"/> Boy Scouts <input type="checkbox"/> Varsity Scout <input type="checkbox"/> Venturing Scouts <input type="checkbox"/> Sea Scouts <input type="checkbox"/> Girl Scouts		
Which best describes your Unit?: <input type="checkbox"/> Pack <input type="checkbox"/> Troop <input type="checkbox"/> Team <input type="checkbox"/> Crew <input type="checkbox"/> Ship		Unit #: _____
BSA or GSUSA District: _____		BSA or GSUSA Council: _____

SECTION 4: NON-AAMES SCOUTING UNITS:

Please complete this section if the Scouting Unit to which you belong is NOT chartered/sponsored by an AME Church or organization:

Name & Address of Chartered Organization:		
Unit Type: <input type="checkbox"/> Cub Scouts <input type="checkbox"/> Boy Scouts <input type="checkbox"/> Varsity Scouts <input type="checkbox"/> Venturing Scouts <input type="checkbox"/> Sea Scouts <input type="checkbox"/> Girl Scouts		
Which best describes your Unit?: <input type="checkbox"/> Pack <input type="checkbox"/> Troop <input type="checkbox"/> Team <input type="checkbox"/> Crew <input type="checkbox"/> Ship		Unit #: _____
BSA or GSUSA District: _____		BSA or GSUSA Council: _____

SECTION 5: TELL US ABOUT YOUR SCOUTING EXPERIENCE

Please list all positions you currently hold or held in scouting. Please list all scouting awards/recognition. Please list all scouting training.

Date: _____

Signature: _____

To pay online: Go to www.AMECED.ORG → Home Page → Scouting Ministry → On-Line Registration
To pay by check: Make checks payable to: Association of African Methodist Episcopal Scouts (AAMES) / Mail to: Post Office Box 10923, St. Louis, MO 63136
 Regardless of payment method used, please **make sure to send a copy of your membership form to Mr. Robert McRath at robertmcrath@i1.net**