

**SOMDAPA, INC.**  
**P.O. Box 104, Morganza, MD 20660**  
[www.somdapa.com](http://www.somdapa.com)

**2016 Membership/Renewal Form**  
**Adults: \$20.00/Junior: \$10.00(age 17 and younger)**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**(If you wish to receive minutes, pull results and information via e-mail)**

Checks should be made out to SOMDAPA, Inc.

Please return this form with your dues to: SOMDAPA, Inc.

P.O. Box 104

Morganza, MD 20660

Any questions, comments or other information may be written below or emailed to [editor@somdapa.com](mailto:editor@somdapa.com).

**Please fill out and return with dues for the 2016 season!**