## MSHA Membership Mail-in Form

Name:	
Address:	
City:	State:ZIP:
Home Phone:	Business Phone:
Email:	
Club you play at:	Birth Year:
information this calendar year, Help support Handball in M	out. I have enclosed a donation of
Alternatively, visit our sponsor ways of supporting handball.	rship page for more details on matching funds and other
Mail to:	
MSHA: c/o Sheldon Silberman	n
120 North Westwood Drive	
Golden Valley, MN 55422-525	59