

SEPA Membership Form

Please send your check for \$25 (or \$15 if outside the SEPA geographical region) to:

SEPA
c/o Mickey Jo Sorrell
Morehead Planetarium and Science Center
CB #3480 UNC-CH
Chapel Hill, NC 27599

Name _____

Organization _____

Planetarium _____

Address _____

City _____ State _____ Zip _____

Voice Phone _____

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E-mail Address _____

Staff Position _____

IPS Member? Yes No

Contribution to Scholarship Award Account: \$ _____

