

Cigar Rights of America

Membership Application



PRIVACY POLICY: When you give us your information such as email and mailing addresses, we do not share them with third parties for marketing purposes. We use your mailing and email addresses to communicate with you regarding your membership and issues affecting your freedom and right to enjoy cigars. If we send you an email, you will be given the opportunity to decline receiving similar emails in the future.

UNDERAGE POLICY: Cigar Rights of America (CRA) neither solicits nor accepts CRA Membership from any person under 18 years. If you are a person under 18 years, please do not apply for CRA Membership.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Referred By: _____

Membership Term:

1-Year Membership (\$35)

2-Year Membership (\$65) – **Save \$5!**

Lifetime Membership (\$500)

3-Year Membership (\$95) – **Save \$10!**

4-Year Membership (\$120) – **Save \$20!**

Credit Card: Visa MasterCard American Express Discover

Card Number: _____ Exp. Date: _____

CSV: _____ (Visa/MasterCard/Discover: 3-digit code on the back of card, AMEX: 4-digit code on the front of the card)

Name on Card: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

If you wish to pay by check or money order, make them payable to **Cigar Rights of America**. Mail this membership form with your payment to:

Cigar Rights of America - Membership Dept.
5105 E. Los Angeles Ave, Suite 155
Simi Valley, CA 93063, U.S.A.

You can also fax this membership form to (800) 460-6207- *Credit card payments only!*