



Society of North Carolina
Archivists
P.O. Box 20448

Membership Application/Renewal Form

Please print and fill out the following form completely. We appreciate having your most current information!

Dues are:

\$25.00 per year for individuals or institutions (please circle one)

\$12.50 for graduate students

Mail your form to:

Alston Brake
5136 Lundy Dr.
Raleigh, NC 27606

Mail your check to:

Society of North Carolina Archivists
P.O. Box 20448
Raleigh, NC 27619-0448

You will have a one month grace period in which to mail your check. Please include your name (as it appears on your renewal form) in the memo field of your check.

Date: _____

Renewal: or New Member:

Name: _____

Title: _____

Institution: _____

Business Mailing Address: _____

Telephone: (____) ____-_____

E-Mail: _____

I prefer to be contacted via U.S. Mail

I am interested in serving on the following committee/office _____

I am enclosing \$_____ as a tax-deductible contribution to the Endowment Fund.

I don't want any of my membership information included in the on-line directory.

I want some of my information included in the on-line directory, as detailed below:
