

THE BALTIMORE BIBLIOPHILES

Affiliate, The Sellowship of American Sibliophilic Osocieties

MEMBERSHIP APPLICATION FORM

Date:_____ NAME: _____ MAILING ADDRESS: Phone Number: _____ EMAIL ADDRESS: _____ WHAT ARE YOUR BOOK-COLLECTING INTERESTS? HOW DID YOU LEARN OF THE BALTIMORE BIBLIOPHILES? PLEASE INDICATE HOW YOU ARE PAYING: _____ PAYPAL OR _____ CHECK TO COMPLETE YOUR APPLICATION... Please mail a completed copy of this form to: THE BALTIMORE BIBLIOPHILES C/O SUSANNAH HORROM, MEMBERSHIP CHAIR 415 BROOK RD TOWSON, MD 21286 Or email a completed copy of this form to: SHORROM@GMAIL.COM And Pay \$55, either by enclosing a check made out to the Baltimore Bibliophiles with the form or by sending a payment via Paypal.com to BALTBIB@GMAIL.COM (note, no "s" on baltbib@!) THIS PAYMENT REPRESENTS YOUR FIRST ANNUAL DUES PAYMENT.

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