



To become a member, please print out this application, fill in the relevant information clearly (as you would like it to appear in the directory), and mail it to the address below.

Date: _____

Name _____

Mailing Address _____

City _____ State _____ Zip _____

Home Phone (____) ____ - _____ Work Phone (____) ____ - _____

Cell (____) ____ - _____ Fax (____) ____ - _____

E-Mail Address _____

Institutional Affiliation _____

Membership Level (check one):

- Individual \$25
- Student \$15
- Institution \$50/100/150
- Sponsor (individual) \$50/100/150
- Friendship \$15
- Lifetime \$195

Please MAKE ALL CHECKS PAYABLE to **SOHA**.

Send payment to : **Rose Diaz**
3408 D Indian School Rd. NE
Albuquerque, NM 87106

Circle committees in which you might be interested:

Newsletter **Membership** **Annual Meeting** **Grants/Scholarships**

Membership questions can be sent to rosediaz013@gmail.com.

Thank you for your interest in SOHA!