



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 \$100 (Allows up to 4 registrations at the Member rate for the Annual Meeting)

Sponsor/Donation: I would like to support the work and programs of the Southwest Oral History Association with the following donation: \$ _____

Lifetime \$250

*SOHA is a 501 (c) (3) non profit organization and donations are very much appreciated. Such donations are tax deductible in accordance with IRS Tax Code Section 170(c).

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

Mail to : Rose Diaz

3408 D Indian School NE

Albuquerque, NM 87106

Questions: rosediaz013@gmail.com

Visit our website for more information or e-registration: www.southwestoralhistory.org

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!