



The Aldus Society

2018 Membership Form

*The Aldus Society is open to all individuals
who appreciate the many facets of text and image.*

Name: _____

Address: _____

City/State/Zip: _____

Phone 1: _____ Home Mobile Work

Phone 2: _____ Home Mobile Work

E-Mail: _____

Second Name (Family Memberships): _____

Second Name E-Mail: _____

My book-related
interest are: _____

PLEASE INDICATE YOUR ANNUAL MEMBERSHIP LEVEL AND CONTACT PREFERENCES BELOW

Annual Membership (check one):

- \$15 —Student
- \$50 —Individual
- \$25 —Individual—*out-of-town*
(I live 100 miles outside Columbus)
- \$75 —Family
- \$125 —Patron ***Thank you for your generosity!***

If joining after July 1st, you may pay half your chosen membership level. If joining after Nov. 1st, pay full amount for a full membership for following year.

Please check all appropriate:

- This is a new membership
- I am renewing my membership
- I prefer to receive **print** copies of newsletters by mail instead of reading an electronic copy
- Do **not** include me in the Membership Directory
- Do **not** include me in the Aldus E-Mail Group (listserv)
- Do **not** include my photo in any Aldus publications or social media

I am including an additional donation of \$_____ in support of the Ravneberg Memorial Lecture.

Mail this form with your payment to:

The Aldus Society
P.O. Box 1150
Worthington, OH 43085-1150

For Aldus use: Payment date: _____ Amount: _____

Method: Cash Check number: _____

Added: Listserve_____ Directory_____ Name tag_____

As desired, you may clip this bottom section off to retain for your records.

Payment date: _____ Amount: _____ Check number: _____

The Aldus Society is a 501(c)3 nonprofit and your support is tax deductible.

The Aldus Society ♦ PO Box 1150, Worthington, OH 43085 ♦ www.aldus society.com