



# The Aldus Society 2019-2020 Membership Form

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

**FOR RENEWING MEMBERS, EDIT BELOW AS NEEDED.**  
**FOR FAMILIES, INDICATE NAME LINKED TO EMAIL OR PHONES, AS DESIRED.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

2nd Name (Family Memberships): \_\_\_\_\_ Home Phone: \_\_\_\_\_

Phone 1: \_\_\_\_\_ Name \_\_\_\_\_  Mobile  Work

Phone 2: \_\_\_\_\_ Name \_\_\_\_\_  Mobile  Work

E-Mail: \_\_\_\_\_

2<sup>nd</sup> Name E-Mail: \_\_\_\_\_

My book-related interests include: \_\_\_\_\_

**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!**

**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.

**Payment Info/Method: (check one)**

- Check no.: \_\_\_\_\_
- Invoice me via **PayPal** where I can use a Debit/Credit card

Amount: \_\_\_\_\_ Mailing date: \_\_\_\_\_

**Return this form with your payment (if applicable) to:**

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

**For Aldus use:** Added: Listserv: \_\_\_\_\_ Directory: \_\_\_\_\_ Name tag: \_\_\_\_\_

FOR YOUR RECORDS > > **Detach here** > > FOR YOUR RECORDS > > **Detach here** > > FOR YOUR RECORDS  
Payment date: \_\_\_\_\_ Amount: \_\_\_\_\_ Check number: \_\_\_\_\_ **or**  Paid via PayPal invoice