

The Chicago Mahlerites

Membership Application Form

Please mail your form to
Attention: Membership Application
James L. Zychowicz
P. O. Box 146517
Chicago, IL 60614-146517

Name: _____

Address: _____

E-mail: _____

It is important to provide us an e-mail address if you have one, for we will need to add you to our internet discussion group. If there is hard-to-read symbol in your e-mail (such as an underscore, please indicate it clearly)

Phone (opt): (_____) _____

Please indicate the format you prefer to receive our newsletter:

Hard Copy _____ PDF _____

Hard Copy _____ (institutional subscription to *Naturlaut*: hardcopy only)

Please enclose a check payable to The Chicago Mahlerites

Annual membership (regular): \$20

Annual subscription to newsletter (institutional): \$100

We collect membership/subscription dues on January 1. We will make your membership retroactive to January 1 and will send you past issues of our newsletter of that year.

To foster better communication, we regularly update our directory, which will be distributed to our members. Please indicate below if you would like your address and phone number listed in the membership roster. If you choose no, only the state and city of your address will be included.

Please add my contact info in the directory. _____

I do not wish to have my info listed. _____