As a memorial to Ginny Heinlein, sign up a new member

Please tell us how to contact you. Most information is optional, of course, but it will help us serve your interests better. The few fields we must have in order to enter you in our membership rolls are marked with an asterisk [*].

First name: * __________________________________________________________

Middle initial: ________________________________________________________

Last name: * __________________________________________________________

Title: _____________________________ Organization: ______________________

Street address: * ______________________________________________________

Address (cont.): _______________________________________________________

City: * _______________________ State/Province: * ________________________

Zip/Post code * ____________________ Country: * _________________________

Work Phone _____________________ Home Phone: _________________________

E-mail * _________________________ Website: __________________________

Date of Birth: ____________________ Gender: Male ___ Female ___

For which membership are you applying?

__ $35.00 Regular
__ $15.00 Supporting
(non-voting student or senior citizen)

Please check any or all of the following areas which interest you:

__ Academic                      __ Literary
__ Blood Drives                  __ Fund-Raising
__ Non-English Out-Reach         __ Education
__ Libraries                     __ Membership
__ Centennial                    __ Aerospace Out-Reach

Mail to:
The Heinlein Society
c/o Secretary-Treasurer
PO Box 1254
Venice, California 90294 USA