



phsne.org

Photographic Historical Society of New England

47 Calvary St, Waltham Massachusetts 02453

PHSNE Application, Renewal & Update Form

Membership year is September 1 through August 31.

Membership dues received in March through August of a given year are valid for the rest of that calendar year and through August 31 of the next year.
Dues received in September through February are valid until the next August

FOR RENEWAL OR INFORMATION UPDATE:

I am renewing. I am updating information. (Enter name & information that has changed below.)

Renewal Dues: (Check category. Rate valid for payments received through June 2023.)

\$30 Student* \$50 Individual or Institution \$55 Family \$60 Foreign

*Student members must include a copy of their current active student ID.

FOR A NEW MEMBERSHIP:

How did you learn about PHSNE? _____

Dues for First Year of a New Membership: (Rate valid for dues received through June 2023.)

\$15 Student* \$25 Individual or Institution \$27.50 Family \$30 Foreign

*Student members must include a copy of their current active student ID.

MEMBER'S INFORMATION:

Name: _____

Include both names at one address for a Family membership.

Address: _____

City: _____ State _____ ZIP: _____ - _____

Country: _____ Postal Code: _____

Contact Information:

Home Phone: _____ Work Phone: _____

Mobile Phone: _____ Fax: _____

e-Mail: _____ OPT-IN for e-mail newsletters. You **must** opt-in to receive email notice of *snap shots* newsletter and meeting notices.
Please use block letters for accuracy.

Interests: _____

For Membership Directory. Space is limited, a long list will be truncated.

FOR A GIFT: (If you are giving a gift membership, include your Information.)

Giver's Name: _____

Address: _____

City: _____ State _____ ZIP: _____ - _____

Country: _____ Postal Code: _____

Phone: _____ e-Mail: _____

Your e-mail address will only be used to confirm this gift.

PAYMENT: (Please check form of payment.)

- By credit card or PayPal account online at phsne.org/join or phsne.org/renew and mail in this form.
- By check in US dollars drawn on a US bank, or dollar-denominated international money order, payable to PHSNE.

A pdf form is at docs.phsne.org/pdf-application and an online form is at docs.phsne.org/online-application.

MAIL THIS FORM TO:

Membership Chair
Photographic Historical Society of NE
47 Calvary St
Waltham, MA 02453
USA

QUESTIONS? CONTACT MEMBERSHIP CHAIR AT:

Email: membership-chair@phsne.org
Phone: 781-893-0843

PHSNE is a 501(c)(3) non-profit corporation.

For PHSNE Use Only:	Check/Trans. #	Amount	Check/Trans. Date