WESTERN RESERVE ARCHITECTURAL HISTORIANS

MEMBERSH	IIP FORM	[□ NEW MEMBER			
(January 1 through	gh December 3	31)				
			\square RENEWAL			
MEMBERSHIP (CATEGORIES	S:				
☐ Student	\$15.00	\Box Couple	\$30.00	\square Sustaining	\$55.00 +	
\Box Individual	\$20.00	☐ Supporti	ng \$45.00			
Make check pag	yable to:	Western R	eserve Archite	ectural Historians		
Name:						
Street Address: _						
City:		State:	Z	ip Code:		
Phone (daytime):Phone (evening):						
Phone (cell):						
Email (Please Prin	nt Clearly)					
			WRAH			
Mail (with your check) to:			Judith M Sheridan, Secretary 8774 State Route 45			
Check Amount:			N Bloomfield, OH 44450-9701			
Thank you for	your suppor	t of WRAH.				
Dues are from	January 1 to	December 31				
Comments, or S	Suggestions	for Future Pr	ograms:			
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