

INSTITUTE FOR
HISTORICAL STUDY

Membership Application

Name (formal): _____

(informal, if different) _____

Mailing address: _____

Email: _____

Home phone: _____ Work or cell: _____

Background: including education, degrees, publications, institutional affiliations, etc.
(and/or enclose a CV or resume).

Current history-related scholarship, interests, and/or activities:

Benefits of membership in the Institute that interest you? (e.g., camaraderie, help with a project, join a study group, etc. Be as specific as possible.)

How did you learn about the Institute? _____

Please mail application and \$35 check for annual dues to:

Membership Chair Institute for Historical Study PO Box 5743 Berkeley, CA 94705
