



THE SILURIANS PRESS CLUB MEMBERSHIP APPLICATION.

Date: _____

To the Membership Committee:

I hereby apply for admission as an Active Member (9 years journalistic service) of the Silurians Press Club, Inc. If elected, I agree to abide by the Constitution and By-Laws of the organization.

Name: _____

Address, including Apt. #: _____

City, State, ZIP Code: _____

Telephone: _____

E-mail (print clearly please): _____

Present Affiliation: _____

Position and Dates: _____

Previous Media Affiliation: _____

Position and Dates: _____

Prior Media Affiliation: _____

Position and Dates: _____

Signature

Please return with a check made out to Silurians Press Club for \$85. That includes annual dues of \$60 and a \$25 initiation fee. Send to: Silurians Press Club, P.O. Box 1195, Madison Square Station, New York, N.Y. 10159.

Proposed by: _____