



Membership Application

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Office: _____ Cell: _____

Email: _____

NOTE: if you do not want your email address and phone numbers included in our published membership directory, please check here:

PLEASE INDICATE TYPE OF MEMBERSHIP:

	<u>Mailed Newsletter</u>	<u>E-mailed Newsletter</u>
___ Sustaining Member	\$85.00	\$80.00
___ Regular Member	\$45.00	\$40.00
___ Family Members (2 members, 1 newsletter) Please list names: _____	\$60.00	\$55.00
___ Family Members (3 members, 1 newsletter) Please list names: _____ _____	\$85.00	\$80.00
___ National Member (Located more than 250 Miles outside of Chicago)	\$40.00	\$35.00
___ Student Member	\$32.50	\$27.50

I am interested in donating to the Battlefield Preservation Fund.

Additional amount enclosed \$ _____ -- OR -- Please contact me with further details

MY AREAS OF SPECIAL INTEREST ARE:

- | | |
|---|---|
| <input type="checkbox"/> POLITICAL FIGURES
<input type="checkbox"/> SOCIAL HISTORY
<input type="checkbox"/> BATTLES AND LEADERS
<input type="checkbox"/> SPECIFIC UNITS
<input type="checkbox"/> COMBAT ARMS
<input type="checkbox"/> INFANTRY
<input type="checkbox"/> CAVALRY
<input type="checkbox"/> ENGINEERS
<input type="checkbox"/> SIGNAL
<input type="checkbox"/> INTELLIGENCE
<input type="checkbox"/> LOGISTICS | <input type="checkbox"/> NAVAL HISTORY
<input type="checkbox"/> CIVIL WAR MEDICINE
<input type="checkbox"/> CIVIL WAR MUSIC
<input type="checkbox"/> COLLECTING ARTIFACTS
<input type="checkbox"/> BATTLEFIELD PRESERVATION
<input type="checkbox"/> LIVING HISTORY/RE-ENACTMENTS
<input type="checkbox"/> GUIDED TOURS OF BATTLEFIELDS
<input type="checkbox"/> WAR GAMING
<input type="checkbox"/> OTHER (Please indicate) _____
_____ |
|---|---|

PLEASE MAKE YOUR CHECK PAYABLE TO: THE CIVIL WAR ROUND TABLE OF CHICAGO

Mail this form and your payment to:

Mark Matranga, Registrar, 201 N. Elmwood Ave. Oak Park, IL 60302

Visit us at www.ChicagoCWRT.org