American Overseas Schools Historical Society

704 West Douglas Avenue, Wichita, Kansas 67203

MEMBERSHIP/DONATION FORM

CHECK ONE: New Member _____ Renewal _____ Life _____

Printed full name: _____ Maiden Name: _____

Address:_____ _____ _____ _____
(Street or Box No.) (City/APO/FPO) (State) (ZIP)

Telephone:_____ **Email:** _____

I am a Former _____ -or- Current_____ Educator; Former Student _____

$25 for 1-year dues and 4 issues of the newsletter $_____

$45 for 2 years dues and 8 issues of the newsletter $_____

Donation to the AOSHS Operating Fund $_____

THANK YOU!

VISA/Mastercard |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__| Expires ___/___

3-digit Security Code on back of card _____

Name on credit card _____

Check enclosed: _____ Check Number: _____
(Make check/money order payable to AOSHS)

Signature: _____ **Date:** _____

I have included AOSHS in my estate planning _____
This can be a monetary donation and/or property donation to the Archive for preservation.
Please read our Donation Dos & Don'ts at ***www.aoshs.org*** *under* ***About Us.***

Can we list your email address in our Directory? YES_____ NO_____

Send to: **AOSHS**
704 W. Douglas Ave
Wichita, KS 67203-6104