



# ARCHIVISTS OF THE HOUSTON AREA

## Membership Application

Please complete and return to the AHA! Treasurer, via email or at the next meeting. Dues of \$10.00 must accompany this application. Checks and money orders should be made payable to: **Archivists of the Houston Area** or **AHA!** Please do not send cash in the mail. If you opt to submit application via email, an electronic invoice will be sent to you. A \$1.00 convenience fee will be added for credit card payments. Mail dues to:

Laura Ramirez  
2310 Halbert Dr.  
Pearland, TX 77581  
alamirez@uh.edu

Contact Information			
Name:		Institution:	
Please contact me: <input type="checkbox"/> Home <input type="checkbox"/> Institution		Job Title:	
Home		Institution	
Address 1:		Address 1:	
Address 2:		Address 2:	
City:		City:	
State:	Zip:	State:	Zip:
Phone:		Phone:	
Email:		Email:	

### Other professional affiliations:

- SAA                       SSA                       ACA                       ALA                       TLA
- TSHA                       ETHA                       RBMS                       ARMA                       ARLIS
- ACDA                       AASLH                       Other: \_\_\_\_\_

### AHA! May include the following information in a directory for members only:

(Check all that apply. If you do NOT check any box, you will NOT be included.)

- Name (Job Title, Email)                       Home Contact (Email, Phone)                       Institutional Contact (Name, Address, Phone, Email)                       Professional Affiliations
- Other restrictions (specify): \_\_\_\_\_

Would you be interested in hosting a meeting for AHA?  Yes, call me!  Yes, email me!

For AHA! Use Only:				
Dues Paid: Date _____	2023	<input type="checkbox"/> Cash	<input type="checkbox"/> Check #	<input type="checkbox"/> Credit Card
				Initial _____