

The Horatio Alger Society

Membership Form

Name: _____ Today's Date: ____/____/____

Are you a new or renewing member?

New Renewing If renewing, what is your PF#? _____

MEMBERSHIP LEVEL

Standard (\$25/year) Senior (55 or older) (\$20/year)

Date of Birth: ____/____/____

CONTACT INFORMATION

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email address: _____ Phone Number: (____) _____

OPTIONAL

Occupation: _____

Interests other than Alger: _____

Number of Alger's owned: _____ How many are firsts? _____

Additional information or questions:

Thank you for your membership! Please mail this form, with payment, to:

Horatio Alger Society
4940 Old Main St, Unit 206
Henrico, VA 23231-3042