

Date Approved: _____ Affiliate No.: _____

(For official use only, do not write in above space)



AMERICAN PHILATELIC SOCIETY

REQUEST FOR AFFILIATION

MAIL TO: American Philatelic Society, 100 Match Factory Place, Bellefonte, PA 16823

PLEASE PRINT OR TYPE

Please submit a copy of your Bylaws, Membership Roster (identify APS members), and official journal. There are no annual dues for affiliates. Your completed application and the documents requested will be presented to the APS Board of Directors for consideration.

Society Name: _____

Name of President: _____ APS Number: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: Home () _____ Office () _____

Name of APS Representative: _____ APS Number: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: Home () _____ Office () _____

E-mail _____

Website _____

Year Organized: _____ Total Members: _____ APS Members: _____ Bylaws: _____ Yes _____ No

Purpose of Organization: _____

Title of Official Journal: _____

How often is it published--annually, quarterly, monthly, etc.: _____

Annual Dues: _____

Services include: _____

If desired, the affiliate exchange copy of *The American Philatelist* may be sent to a local library or to your affiliate library rather than to the Affiliate Representative. Enter the name and mailing address below if this option is desired.

Name of Library or Librarian: _____

Mailing Address: _____

The above representative hereby agrees to be responsible for furnishing the Executive Director of the American Philatelic Society an annual report including names and addresses of the affiliate's current officers on a published report, or, if no published report exists, on a form furnished by the Executive Director and to provide copies of its bulletins and membership list when published.

Signature of Official Representative: _____ Date: _____