

APPLICATION FOR MEMBERSHIP

Return this application with your \$25.00 check or money order payable to:

Daniel J. Rieber
33 Riverside Dr. Apt. 2A
New York, NY 10023

Name: (please print) _____

Address: _____ Apt. # _____

City: _____ State _____ Zip _____

Telephone: (____) _____ Best time to call: _____

e-mail address: _____

Are you an APS Member? _____ Yes _____ No - If yes, please give number _____

Please list your collecting interests: Countries? Topics? Mint and/or used? Covers? Certain years?
