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The American Hatpin Society Membership Application

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

E-MAIL: _____

TELEPHONE: _____

Please complete the application and enclose your check for \$45.00 (\$55 for members outside of the United States) payable to the AMERICAN HATPIN SOCIETY.

You can pay by PayPal. Contact jodi@lenocker.com for PayPal instructions.

MAIL APPLICATION AND PAYMENT TO:

American Hatpin Society
c/o Jodi Lenocker
P.O. Box 2672
Lake Arrowhead, CA 92352