

Membership and Subscriptions: Mail form

Please print this form, complete the requested information, and mail it with your payment to:

Pacific Coast Archaeological Society
P O Box 10926
Costa Mesa, CA 92627

Memberships and subscriptions are for the calendar year.

Name: _____

Street address: _____

City: _____

State: _____ Zip: _____

Phone: _____

Email: _____

PCAS Newsletters will be sent to the email address listed above unless a hard copy is specifically requested.

I have read and agree to abide by the PCAS Code of Ethics.

(signature) _____

Membership

- | | | |
|--|---------------|---|
| <input type="checkbox"/> Active member | \$45 | All members receive the Newsletter and Quarterly. |
| <input type="checkbox"/> Active family (2 persons) | \$50 | |
| <input type="checkbox"/> Supporting member* | \$55 or above | |
| <input type="checkbox"/> Donor member* | \$75 or above | |
| <input type="checkbox"/> Lifetime member* | \$1,000 | |

*may be family membership

Subscriptions only

- | | |
|--|--------------------|
| <input type="checkbox"/> Quarterly only | \$40.00 per volume |
| <input type="checkbox"/> Newsletter only | \$20.00 per year |

_____ I want to make an additional donation of \$ _____ to PCAS Scholarship Fund.