



**Friends of Arizona Archives**  
**Membership Application/Renewal Form**  
**and**  
**Donor Form**

**Name** \_\_\_\_\_  
**Address** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**City** \_\_\_\_\_  
**State** \_\_\_\_\_ **ZIP** \_\_\_\_\_  
**Work phone** \_\_\_\_\_ **Home phone** \_\_\_\_\_  
**Email address** \_\_\_\_\_

- Individual (\$20)
- Family (\$30)
- Patron (\$50)
- Student (\$10)
- Nonprofit Organization (\$30)
- Business (\$100)

*All FAzA memberships are due for renewal on July 1. If you join between March 1 and July 1, your membership will automatically be renewed on July 1 for a full year.*

- I would like to donate to FAzA \$ \_\_\_\_\_
- I would like to volunteer for FAzA.
- Please do not add my name to the FAzA directory or mailing list.

Send this form and a check payable to "Friends of Arizona Archives" to:

Friends of Arizona Archives  
P. O. Box 64532  
Phoenix, Arizona 85052-4532