

National Lodge Enrollment Form

YES, I WOULD LIKE TO ENROLL IN THE NATIONAL LODGE. (You must be a current member of the Theosophical Society in America to join the National Lodge.)

Name (print) _____

Home Address, City, State, Zip _____

PLEASE CHECK ONE OF THE FOLLOWING:

Mail papers to my home address. (\$15 annual dues)

E-mail my papers to me. (\$10 annual dues)

E-mail address _____

INDICATE METHOD OF PAYMENT

Check enclosed. \$15 for postal delivery; \$10 for e-mail. Make your check payable to The Theosophical Society.

Bill my credit card

VISA

MasterCard

Discover

Credit Card # _____

Expiration date (month/year) _____

3-digit Authorization ID# _____ (Found on the signature line on the back of your card.)

Signature required for payments by credit card

RETURN this form to: The National Lodge, P.O. Box 270, Wheaton, IL 60187-0270