

# GAY AND LESBIAN HISTORY ON STAMPS

## MEMBERSHIP APPLICATION

First Name: \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name: \_\_\_\_\_

Nick Name: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province/Other Locality \_\_\_\_\_

ZIP/Post Code: \_\_\_\_\_ Country: \_\_\_\_\_

Home / Cell Phone: \_\_\_\_\_ Directory Listing Phone (Optional) \_\_\_\_\_

Date of Birth (Optional): \_\_\_\_ / \_\_\_\_ / \_\_\_\_  Do NOT release my name to the APS/ATA/AFDCS.

Please list in the Membership Directory my full name, collecting interests and:

Mailing Address     Email Address     Directory Listing Phone Number     Do not list me

### COLLECTING INTERESTS (Optional)

Please list one interest on each line in this format: *Country or Topic; mint, used, etc.; Additional Information as needed*. Examples: LGBT mint singles; U.S. used souvenir sheets; U.S. unused plate blocks; New York postal history; Great Britain revenue used singles; Stamps on Stamps MNH.

Interest 1: \_\_\_\_\_

Interest 2: \_\_\_\_\_

Interest 3: \_\_\_\_\_

Interest 4: \_\_\_\_\_

Interest 5: \_\_\_\_\_

### PHILATELIC ORGANIZATION MEMBERSHIPS

American Philatelic Society     American Topical Association     American First Day Cover Society

Other National or Local Philatelic Organizations: \_\_\_\_\_

Reference and Address (If national philatelic organization, indicate member number):

\_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*Print this form and mail it along with a \$10 check to:* Lisa Foster  
646 169th St. S.  
Spanaway, WA 98387-8912