

ASSOCIATION
OF
HAWAII
ARCHIVISTS

Association of Hawaii Archivists

P.O. Box 1751, Honolulu, Hawaii 96806



AHA Membership & Renewal Form

Membership Category:

- Institutional Membership (\$25)
- Individual / Regular Membership (\$15)
- Student Membership (\$7.50)

Name:

Institution:

Position:

Address:

Work Telephone:

Fax Number:

e-mail Address:

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Please make your check out to the **Association of Hawaii Archivists**, and send it with this form to **P.O. Box 1751, Honolulu, Hawaii 96806**.

Thank you!

Date Received: _____