

Registration Form

Henry S. Olcott Memorial Library - The Theosophical Society in America

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ e-mail: _____

Birthdate: _____

I am currently a member of the Theosophical Society in America: Yes _____ No _____

[Members of the Theosophical Society in America who are residents of the United States receive free library privileges as part of their membership. If you are not a member there is a fee to borrow books from the Library. Please complete information on page 2]

I agree to the borrowing conditions of the library and accept responsibility for the materials checked out in my name.

Signature _____

Date _____

Mail or fax this completed form to:

Henry S. Olcott Memorial Library
P. O. Box 270
Wheaton, IL 60187-0270
Fax 630-668-4976

If you are not a member of the Theosophical Society in America, please attach payment information or we can take payment over the phone at 630-668-1571 ext. 304:

Life Library membership \$ 150

One-year Library membership
Mail borrowers: \$ 40

Total payment included

\$ ____ . ____

Checks

Checks can be made payable to "Theosophical Society in America" or "TSA" and mailed to:
Theosophical Society in America, P. O. Box 270.

Credit Card

Visa Mastercard Discover

Credit card number Exp. date

3-digit Verification Code (located on back of the card) _____

Billing Zip Code _____

Signature _____