

# 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 above. (\$30 annual dues)

E-mail papers to my e-mail address below. (\$10 annual dues)

E-mail address \_\_\_\_\_

INDICATE METHOD OF PAYMENT

Check enclosed. \$30 for postal delivery; \$10 for e-mail. Make your check payable to The Theosophical Society.

Bill my credit card       VISA       MasterCard       Discover       American Express

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