



AOSHS

American Overseas Schools Historical Society

MEMBERSHIP/DONATION FORM

☐ New Member ☐ Renewal ☐ Donation Only

How did you hear about us? ☐ Friends ☐ Facebook ☐ Web Search ☐ Other _____

Printed full name: _____ Maiden Name: _____

Address: _____
Street or Box City/APO State/AA/AE/AP/Country Zip Code

Telephone: _____ Email: _____

☐ Educator ☐ Student ☐ Other

☐ Membership for Current Year Retiree \$0
\$25 for 1 year dues \$ _____
\$45 for 2 years dues \$ _____
\$100 for 5 years dues \$ _____
Donation to the AOSHS Operating Fund \$ _____
Other _____ \$ _____

**Please visit our website at aoshs.org and click on "Quarterly"
to access our membership newsletter.**

Credit Card _____ Expires ____/____

Security Code _____ Zip Code _____



Name on credit card _____

☐ **CHECK ENCLOSED** Check Number: _____
(Make check/money order payable to AOSHS)

Signature: _____ Date: _____

Mail to:
AOSHS, 704 W. Douglas Ave., Wichita, KS 67203-6104

THANK YOU!

OFFICE USE ONLY

Date Received _____ Logged: ☐ Database ☐ Spreadsheet

Dues Renewal Date ____/____/20____ ☐ Letter of Receipt Sent