



THE SOCIETY OF VIRGIN ISLANDS HISTORIANS
APPLICATION FOR MEMBERSHIP
PO BOX 26425, GALLOWS BAY, VI 00824
www.vihistorians.net

Name: Family _____ First _____ Title _____

Residence _____

Mailing address _____

Email address _____

Telephone: Residence _____ Work _____

Mobile _____ Fax _____

Education:

Current memberships in professional Societies/Associations: _____

Date: _____ Applicant signature _____

YEARLY MEMBERSHIP DUES TO BE PAID UPON NOTIFICATION OF ACCEPTENCE

FULL MEMBERSHIP \$40.00 per person STUDENT MEMBERSHIP \$20.00

Endorsements

Member in good standing

Member in good standing

The Standing Committee on Membership for the Society of Virgin Islands Historians will review each application.