

SHEAR Membership Form (2018)

| ☐ Student: \$30* | ☐ Individual, income to \$45,000: \$40 | | |
|---|---|--|--|
| ☐ K-12 Teacher: \$35 | ☐ Individual, income above \$45,000: \$70 | | |
| ☐ Community College Faculty: \$40 | ☐ Institution: \$120 | | |
| $\hfill\Box$ Non-US orders, please add \$18.00 for ship | oping. | | |
| Provide SHEAR with additional support by will cover your SHEAR membership includi | pecoming a "Friend of SHEAR." Your payment of \$500, \$300, or \$150 ng your <i>JER</i> subscription. | | |
| Sojourner Truth Friend: \$500 | | | |
| Thomas Skidmore Friend: \$300 Nicholas Biddle Friend: \$150 PAYMENT METHODS | | | |
| | | ONLINE WITH CREDIT CARD at http://www.sl CHECK (made payable to SHEAR and mai 215-746-5393, Fax: 215-573-3391, Ema | led to 3355 Woodland Walk, Philadelphia, PA 19104-4531, Phone: |
| | | SHIPPING ADDRESS Name | |
| | | | |
| City | State/Province | | |
| Zip/Postal Code | Country | | |
| Phone | Email | | |
| | | | |
| *0. 1 (DI) 1 2 C | CIL CONTROL OF THE STREET | | |
| *Students: Please submit a copy of your stud | ent identification to the SHEAR office. | | |