



**Archivists for Congregations of Women Religious**

July 1, 2020 - June 30, 2021

\_\_\_\_\_ Renewal Membership

\_\_\_\_\_ New Membership

Name \_\_\_\_\_  
Last Name First Name Cong. Initials

Position Title \_\_\_\_\_

\_\_\_\_\_  
Name of Archives/Institution

\_\_\_\_\_  
Street

\_\_\_\_\_  
City State 9-digit Zip Code

Telephone: \_\_\_\_\_ Ext. \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Congregation: \_\_\_\_\_

Website Address: \_\_\_\_\_

**Annual Membership Fee:** *(Use a separate form for each individual)*

Regular: \$60 \_\_\_\_\_ Retired: \$25 \_\_\_\_\_

Associate: \$40 \_\_\_\_\_ **Additional donation to ACWR:** \_\_\_\_\_

**TOTAL PAYMENT:** \_\_\_\_\_

**Payment Method:** Paypal \_\_\_\_\_ Check \_\_\_\_\_ Check Number \_\_\_\_\_

What do you consider to be your strengths and/or primary focus as an archivist?

Indicate your interest in volunteering for any of the following committees:

Technology \_\_\_\_\_ Nominating / Election \_\_\_\_\_ Conference Planning / Volunteer \_\_\_\_\_

Are you interested in the ACWR mentoring program? As a mentor? Yes \_\_\_\_\_ No \_\_\_\_\_

Having a mentor? Yes \_\_\_\_\_ No \_\_\_\_\_

**Complete and return by 9/1/2020 to:**

Veronica Buchanan, Executive Secretary

ACWR National Office

5900 Delhi Road, Mt. St. Joseph, OH 45051

[archivistsacwr@gmail.com](mailto:archivistsacwr@gmail.com)