



**The Society for the Study of Egyptian Antiquities**  
**P. O. Box 578, Postal Station "P", Toronto, Ontario M5S 2T1, Canada**  
**ATTN: SSEA Membership Secretary**

**APPLICATION FOR MEMBERSHIP**

Please contact me at the following address:

\_\_\_\_\_  
 (Name)

\_\_\_\_\_  
 (Apt./Unit #; Dept. Name)

\_\_\_\_\_  
 (Street number)

\_\_\_\_\_  
 (City & Province/State) (Postal/Zip Code)

\_\_\_\_\_  
 (Country)

\_\_\_\_\_  
 (E-mail)

I/we would like to join the SSEA in the following category:

___ Annual Individual (Canadian):	\$60.00
___ Annual Student (Canadian):	\$30.00
___ Annual Individual (US/Foreign):	\$60.00 US
___ Annual Student (US/Foreign):	\$30.00 US

**PROOF OF STUDENT STATUS** [i.e. Student Number & name of institution]:

\_\_\_\_\_

I would prefer to receive the *JSSEA* and *Newsletters* in  
 \_\_\_ Electronic Format only \_\_\_ Paper Format

Canadian/US members who take their publications in electronic format only are eligible for a tax receipt. Check here if you would like to receive a tax receipt \_\_\_

I would like to include a tax-deductible donation to the SSEA in the amount of: \$\_\_\_

I enclose a: \_\_\_ cheque / \_\_\_ money order in \_\_\_ Canadian funds / \_\_\_ US funds made payable to *The Society for the Study of Egyptian Antiquities*.

**OR**

I would like to pay by VISA \_\_\_ CARD  
 NUMBER \_\_\_\_\_ Expiry Date \_\_\_\_\_

\_\_\_\_\_  
 Application Date