

Croak & Dagger Chapter
of Sisters in Crime

P.O. Box 92483
Albuquerque, NM 87199-2483

Membership Application

Date: _____

Name: Mr./Mrs./Ms/Dr. _____

Address: _____

City: _____ State: _____ ZIP: _____ - _____

Phone: (H) _____ (B) _____ (C) _____

E-Mail #1: _____ E-Mail #2 _____

Web Page URL: _____

Pen Name(s): _____

Member of Sisters in Crime (National)? Yes ___ No
(Required for membership in Croak & Dagger)

Interests (check all that apply): Published Mystery Author ___ Reader ___
Other Published Author ___ Bookseller ___ Librarian ___ Editor ___
Agent/Publicist ___ Other _____

[N.B.: We make no distinction amongst members on the basis of interests.]

Please submit this completed form, together with US\$20.00 first year's dues payable to "Croak & Dagger" to the address in the letterhead.

***** Please do not write below this line *****

Membership Date: _____ Member # _____ By: _____