

**DELAWARE VALLEY
PAPERWEIGHT COLLECTORS ASSOCIATION**

Application for Membership

Names _____

If applicable, please indicate names of all persons included in membership.

Address _____

Email _____

Telephone:

Home _____

Work _____

Indicate type of membership:

Individual	_____	\$ 25 Annual Dues
Household	_____	\$25 Annual Dues
Business	_____	\$25 Annual Dues
Quarterly Ads	_____	\$20 per Annum Stateside
	_____	\$30 per Annum Foreign

Please print out and complete this form, make your check payable to DVPCA and send both form and payment to:

**DON FORMIGLI, Treasurer
455 Stonybrook Drive
Levittown, PA 19055**

It would be helpful if you would tell us how you heard about Delaware Valley PCA.