

SISTERS IN CRIME/LA

1107 Fair Oaks Ave, PMB 338, South Pasadena CA 91030

Membership Application/Renewal Form - L.A. CHAPTER

Name _____ Pen Name _____

Address _____

City, State, Zip _____

Home Telephone _____ Cell phone _____

Website URL _____ E-mail Address _____

NOTE: You must be a member of Sisters in Crime National to join the Los Angeles Chapter. To join National, you must complete their online application. To do so, visit: www.sistersincrime.org

Please confirm you sent SinC National application & check directly to National: yes no

LA CHAPTER DUES. PLEASE CHECK APPLICABLE BOX:

- Membership January 1- December 31 = \$30.00
- New members joining January 1 to June 30 = \$30.00 (membership expires December 31 of that year)
- New members joining July 1 to October 31 = \$15.00 (membership expires December 31 of that year)
- New members joining November 1 to December 31 = \$30.00 (membership expires December 31 of the **following** year or 2 free months of membership)

Renewal Former member rejoining New member

I agree to receive the SinC/LA newsletter, announcements and other chapter benefits via e-mail.

Please send this completed LA Chapter application/renewal form along with your check made out to **Sisters in Crime/LA** to: **SinC/LA, 1107 Fair Oaks Ave, PMB 338, South Pasadena, CA 91030.**

To pay by PAYPAL: Go to www.sistersinrimela.com and fill out the online application form. You will be directed to PayPal for payment. For membership information, contact the Membership Director at: sinclamembership@gmail.com

Please check all that apply:

- | | | |
|---|--|--|
| <input type="checkbox"/> Published: Short Stories | <input type="checkbox"/> Published: Books/Novels | <input type="checkbox"/> Published: Magazines/Newspapers |
| <input type="checkbox"/> Produced: Feature films | <input type="checkbox"/> Produced: TV shows | <input type="checkbox"/> Produced: Screenwriter |
| <input type="checkbox"/> Mystery writer | <input type="checkbox"/> Writer in other fields | <input type="checkbox"/> Reviewer |
| <input type="checkbox"/> Agent | <input type="checkbox"/> Bookseller | <input type="checkbox"/> Librarian |
| <input type="checkbox"/> Editor | <input type="checkbox"/> Reader | <input type="checkbox"/> Other _____ |

What area(s) of expertise do you have that you could share with other members? (Day job/hobbies)

Do you know anyone (including yourself) who would make a good meeting speaker:

Name(s) _____

Subject(s)/Topic(s) _____

Telephone Numbers(s) _____ email _____