



San Jose Post Card Club Membership Application

Mail to: P.O. Box 23115, San Jose, CA 95153

Name _____ Phone _____

Address _____ City _____ State ____ Zip _____

Email _____

Collecting Interests _____

Family Members that collect _____

Date of Membership _____

I hereby apply for membership in the San Jose Postcard Club and agree to abide by the Constitution and by-laws of the San Jose Postcard Club. Membership dues of \$15.00 / year for adults/families (\$6.00 Youth up to age 15) is remitted herewith for the current calendar year.

Signature _____

Date _____

Please mail check and Membership Application to:

San Jose Postcard Club
P.O. Box 23115
San Jose, CA 95153