



Ann Arbor Litho Club Membership Application

Date _____

Name _____ Phone _____

Home Address _____ City _____

State _____ Zip _____ Email _____

Company Name _____ Phone _____

Address _____ City _____

State _____ Zip _____ Email _____

Position _____ Department _____

Preferred Mailing Address: Home Business

Preferred Email Address: Home Business

Purpose of Membership

- To bring together those interested in the printing industry
- To work for the betterment of the printing industry through an exchange of information at monthly meetings
- To spread greater knowledge of technical procedures and new developments through the presentation of educational programs

Applicant Signature _____

Proposed by _____

Proposed by _____

\$32 New Members (includes initiation fee) **\$25 Renewals**

Application must be accompanied by check made payable to:

Ann Arbor Litho Club • P.O. Box 2146 • Ann Arbor, MI 48106

Board of Governors Use Only

Date dues invoiced _____

Date approved by Board _____ Date dues received _____

Date added to database _____ Date inducted _____