

# Confederate Stamp Alliance

## Membership Application

Complete and mail to

Date: \_\_\_\_\_

Larry Baum  
316 W. Calhoun Street  
Sumter, SC 29150-4512

My completed application for membership is below. If elected to membership, I agree to be bound by the Constitution and By-Laws of the Alliance. I understand membership includes a subscription to the *Confederate Philatelist*, published quarterly.

Name: _____	Over 18? Yes___ No___
Address: _____	Collector? Yes___ No___
City: _____ State: _____	Dealer? Yes___ No___
ZIP: _____ Country: _____	Previous? Yes___ No___ CSA Member
Email: _____	If Yes, Previous # _____
Occupation: _____	Philatelic memberships
Home Phone: _____	APS# _____ USPCS# _____
Work Phone: _____	USSS# _____ ASDA# _____
Cell Phone: _____	OTHER _____
Confederate collecting interests: _____	

The mailing address of new members are published in the *Confederate Philatelist* as required by our By-Laws.

Please allow 4 – 6 weeks for your application to be processed. Please remit amount indicated below with your application.

Applicants who submit an application before 1 October will receive the back issues and final issue of the CP for the current year.

Those joining after 1 October will receive the last issue of the CP for the current year and their dues will be paid through the following year.

### Regular Membership

US, Canada, and Mexico: \$32.00/year

All other countries: \$56.00 (includes \$24.00 for mailing the CP).

Junior Membership: \$18.00/year

Payment must be in U.S. FUNDS DRAWN ON A U.S. BANK OR INTERNATIONAL MONEY ORDER, made payable to the Confederate Stamp Alliance. You can also pay with **PayPal using** the following address **paycsapal@gmail.com**. Be sure to include your name and address in the message.

**References:**

Each applicant MUST provide two character references (philatelic preferred, but not required). Provide full information as all references will be contacted as required by our By-Laws.

Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
ZIP: \_\_\_\_\_ Country: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
ZIP: \_\_\_\_\_ Country: \_\_\_\_\_

I agree to the conditions stated on this application and authorize the above references to release financial or character reference information to the Confederate Stamp Alliance.

Signature of Applicant: \_\_\_\_\_

**This section only for applicants under the age of 18**

**To be completed by Guarantor**

Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
ZIP: \_\_\_\_\_ Country: \_\_\_\_\_

Relation to Applicant: \_\_\_\_\_

Guarantor shall be responsible for all debts incurred by Applicant to the Alliance or any of its members until Applicant reaches 18 years of age.

I agree to the conditions stated on this application and authorize the above-stated parties to release financial or character reference information on myself to the Confederate Stamp Alliance.

Signature of Guarantor: \_\_\_\_\_

**To be completed by Proposer"**

I hereby endorse the above Applicant and propose for membership in the Confederate Stamp Alliance (Proposer must not be one of the references above).

Proposed by: \_\_\_\_\_ CSA # \_\_\_\_\_