



**Institutional Membership Form**  
**Annual Membership Fee: \$200**

Name of Institution:

Name of Academic Administrator:

Academic Administrator's email address:

Academic Administrator's Telephone Number:

Academic Administrator's Current Mailing Address (if changed):

Name of appointed VHC delegate:

Delegate's position/title:

Delegate's email address:

Delegate's daytime telephone number:

**Total amount enclosed: \$200**

**PLEASE MAKE CHECKS PAYABLE TO  
VIRGINIA HUMANITIES CONFERENCE**

Return this form with payment to:  
**Renee Garris, Treasurer**  
**Virginia Humanities Conference**  
17313 Jennway Mews, Moseley, 23012

*Electronic membership form and payment also at [vhumanitiesconference.org](http://vhumanitiesconference.org) via PayPal*