

VOSH-Indiana

Application for Membership

VOSH (Volunteer Optometric Services to Humanity) needs your help in several different ways! If you are willing to support VOSH's efforts to bring vision care to some of the world's poor and visually handicapped, please **print** this form and indicate below how you are willing to help.

- I'll collect used eyeglasses for use on missions.
- I am interested in participating on a VOSH-Indiana mission.
- I'll support VOSH-Indiana financially by becoming a member.
 - Life Member \$250.00
 - Patron Member \$100.00
 - Sustaining Member \$60.00
 - Regular Member \$40.00

If you are willing to help in any of the above ways, complete the rest of the form and mail it to:

Jeffrey C. Marshall, O.D.
President, VOSH-Indiana
P.O. Box 19028
Indianapolis, IN 46219
USA

- My membership check (made payable to VOSH-Indiana) is enclosed.

Name _____

Address _____

City/State/Zip _____

Country _____

E-Mail _____

Your support of **VOSH-Indiana** is greatly appreciated!