



**SPEED CITY, Indiana Chapter of Sisters in Crime
Membership Form**

Note: You must be a member of Sisters in Crime National to join the Speed City Indiana Chapter. Visit <http://www.sistersincrime.org> to learn more.

Name: _____

Pen Name: _____

Street Address: _____

City, State, Zip: _____

Home Phone: ____ (____) _____

Work/cell: ____ (____) _____

E-mail address: _____

Enclosed is my check for \$15.00 made out to: **SCISinC**

Renew New member

Please check all that apply:

Published author ___ Published book-length ___ Short stories ___

Published in other fields ___ Published book-length ___ Magazines/news ___

Screenwriter ___ Unpublished writer ___

Reader/fan ___ Reviewer ___ Agent ___ Bookseller ___ Librarian ___ Editor ___

Other: _____

What area(s) of expertise do you have that you could share with other members? (day job/hobbies)

Do you know anyone (including yourself) who would make a good guest speaker?

Name, subject(s), topics(s): _____

Contact information (phone, email): _____

Please send this application along with your check for \$15.00 made payable to **SCISinC** to: **PO Box 11643, Indianapolis IN 46201-0643**

If you need additional information, please contact us at indychapter@speedcitysistersincrime.org

Website: <http://www.speedcitysistersincrime.org>