

The Georg Sverdrup Society Membership Registration Form



Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone: (____) _____ - _____

E-mail: _____

Congregation: _____

City: _____

State: _____

- Please enroll me as a member. Enclosed is my check for \$35 (\$20 for a student or congregational/institutional membership) made payable to "The Georg Sverdrup Society."
- Please send me further information about The Georg Sverdrup Society (resources, meetings, etc.)

Please mail this form to:
Pastor Kris Nyman
300 S. Artizan St.
Williamsport, MD 21795-2002