

## Southern New England Antiquarian Booksellers Application for Membership

Name(s):

Business name:

Street address:

Mail address:

Town, state, zip:

Phone:

Fax:

Email:

Website:

Specialties:

Hours:

By appointment?

Appraisals?

Please ask two current SNEAB members to write you a letter of recommendation ([www.SNEAB.com](http://www.SNEAB.com) for list).

Sponsors:

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

Send to:

Peter L. Masi, PO Box B, Montague, MA 01351 [masibook@verizon.net](mailto:masibook@verizon.net)