

MEMBERSHIP APPLICATION

The Conservation Center for Art & Historic Artifacts (CCAHA) provides conservation and preservation services to nonprofit institutions, governmental agencies, religious organizations, corporations, and private clients.



CCAHA's services include: conservation treatment of paper-based artifacts; photograph conservation; book conservation; conservation framing; preservation assessments; collection surveys; item-specific surveys; educational programs; assistance in emergency preparedness, response, and disaster recovery; and grant proposal development.

Membership entitles institutions to the following benefits:

One \$125.00 credit towards a condition report, treatment proposal, and estimate per year

~ or ~

One hour of free consultation (on-site within a 50-mile radius of Philadelphia, travel cost not included)

~ and ~

Reduced rates for CCAHA sponsored lectures and workshops

Assistance in conservation project design, including grant proposal development

A ten percent discount on regularly-priced products from Hollinger Metal Edge, Inc., a leader in quality archival materials

Access to CCAHA's disaster services, including on-site freezer and emergency conservation assistance

Access to CCAHA's on-site library of preservation and conservation reference materials, including technical bulletins

Free copies of *Art-i- facts*, CCAHA's newsletter featuring articles about conservation and preservation issues

To become a member, please complete the form below and send with a check made payable to CCAHA, 264 South 23rd Street, Philadelphia, PA 19103. To pay by credit card, please contact Della Keyser at 215.545.0613. **For more information** about CCAHA, please visit our web site (www.ccaha.org) or contact us by phone at 215.545.0613 or email at ccaaha@ccaaha.org.

CCAHA's annual membership fees (check one):

- \$150.00/year (institutional budgets under \$1.5 million)
- \$250.00/year (institutional budgets over \$1.5 million)

Institution Name: _____

Mailing Address: _____

Contact Person: _____

Job Title: _____

Telephone #: _____ **Fax #:** _____

E-mail Address*: _____

*Contact person will receive e-mail notification to renew annual membership