

MADISON COUNTY HISTORICAL SOCIETY

Membership Application/Renewal

Please fill out member information below. For renewals, make changes as needed. No changes? Proceed to the next section.

I. Member Information:

Name _____
Address _____
Telephone _____
Email _____
Family members included in family membership _____
Your current level of membership _____

II. Type of Membership for the upcoming year: (Memberships and other contributions are tax deductible to the full extent of the law.)

- Sustainer \$500 or more
- Benefactor \$250 to \$499
- Partner \$100 to \$249
- Friend \$50 to \$99
- Business \$50
- Family \$20
- Single \$10
- Student \$5

III. Member preferences:

Please do not list my name in your publications or at Kemper Residence, as described under Member Benefits on the back of this form.

I would like to take a greater role in the Society.

I would like to volunteer at the Arcade Museum.

I would like the Society to do the following _____

Signature: _____ Date: _____

Please return this form and your check to the Madison County Historical Society, P.O. Box 467, Madison VA 22727.

Thank you.