

# Membership Form

MADISON HISTORICAL SOCIETY  
(Membership year runs from June 1 through May 31)

Please circle membership category

CORPORATE	\$250
BENEFACTOR	\$100
SUSTAINING	\$75
FAMILY (list names)	\$40
INDIVIDUAL	\$25
STUDENT (under 21)	\$5

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

## **VOLUNTEER FORM** (please ✓)

*I am interested in:*

- |  |  |
|--|--|
| <input type="checkbox"/> Clipping newspaper articles | <input type="checkbox"/> Scanning                |
| <input type="checkbox"/> Filing                      | <input type="checkbox"/> Photo Identification    |
| <input type="checkbox"/> Research                    | <input type="checkbox"/> Selected Small Projects |
| <input type="checkbox"/> Photocopying                | <input type="checkbox"/> Computer Input          |
| <input type="checkbox"/> Sorting                     | <input type="checkbox"/> Other _____             |

***Please print this page, complete the information, and enclose it with your tax deductible check payable to:***

**Madison Historical Society,  
P. O. Box 148,  
Madison, NJ 07940**

For further information, contact us at 973-377-0722, Ext. 8