

Meredith Historical Society Membership Form

Yes! I would like to become a member of the Meredith Historical Society. I am enclosing a membership of:

- \$10 Individual
- \$20 Family
- \$ 5 Student
- \$50 Contributing/Sustaining
- \$50 Institutional

I would also like to make a contribution beyond membership of

\$25 \$50 \$100 \$250 \$500 Other \$

Name(s) _____

Address _____

City _____ State _____ ZIP _____

e-mail _____ Phone _____

Please make checks payable to: **Meredith Historical Society**

Send to: **Meredith Historical Society**
P.O. Box 26
Meridale, NY 13806