

# Washington County Historical Society

167 Broadway - Fort Edward, NY 12828

## Membership Application

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Telephone (    ) \_\_\_\_\_ Email \_\_\_\_\_

Do you have an off-season address? (e.g. start: January; end: March)

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Away date: \_\_\_\_\_ Return date: \_\_\_\_\_

### Membership Categories

Benefactor \$500+

Sustaining \$150

Contributing \$75

Patron \$50

Family/Individual \$35

Senior Couple/Senior/Student \$25

I would like to include a gift of \$\_\_\_\_\_ for            Library Operations            General Fund

*Please note that the WCHS membership year is January 1 thru December 31. New memberships received after November 1 will be honored for the following year. Annual memberships and donations are tax deductible to the extent allowed by law.*

Check Enclosed ( Payable to Washington County Historical Society)

Visa    MasterCard    Card# \_\_\_\_\_ Exp: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_

This is a fillable PDF. You may fill it out on your computer using Adobe Reader, then save it to your hard drive and email it to [wchs.ny@gmail.com](mailto:wchs.ny@gmail.com) as an attachment or print and mail to:

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