



Mansfield Historical Society

MEMBERSHIP

Salutation: Mr. Ms. Mrs.

First Name: _____

Middle Initial: _____

Last Name: _____

Suffix Jr. Sr. II III IV

Address: _____

CITY: _____

STATE: _____

ZIP CODE: _____

Home Phone: _____

E-mail Address: _____

Membership Level (please check one)

- Student \$10 Individual \$20 Family \$30 Contributing \$50 Small Business \$75
 Sustaining \$100 Patron \$150 Corporate \$250

I am interested in volunteering to help with the following activities(check all that apply):

- Collections Education Exhibits Genealogy Handyman
 Historical Research Host/hostess Office work Special events
 I wish to contribute and additional \$_____ to support the Historical Society.
 Please contact me with details on how to make a bequest to the Society.

Additional Comments

Please make checks payable to the Mansfield Historical Society

Mail membership form and check to:

Mansfield Historical Society

PO Box 145

Storrs, CT 06268-0145