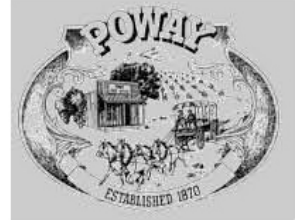


# POWAY HISTORICAL AND MEMORIAL SOCIETY MEMBERSHIP APPLICATION

MAIL COMPLETED FORM WITH DUES PAYMENT TO:  
Poway Historical and Memorial Society, P.O. Box 19, Poway, CA 92074



Name/Organization or Business \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> New Membership                             | <input type="checkbox"/> Renewal   |
| <input type="checkbox"/> Life Membership (\$500)                    | <input type="checkbox"/> Organizational Membership (\$20.00 annual)      |
| <input type="checkbox"/> Individual Membership (\$15.00 annual)     | <input type="checkbox"/> Small Business: 1-10 employees (\$100 annual)   |
| <input type="checkbox"/> Student/Junior Membership (\$10.00 annual) | <input type="checkbox"/> Medium Business: 11-25 employees (\$150 annual) |
| <input type="checkbox"/> Family Membership (\$20.00 annual)         | <input type="checkbox"/> Large Business: 26+ employees (\$200 annual)    |

**Optional: I would like to volunteer to help with:**

- |  |  |  |                                   |   |
|--|--|--|-----------------------------------|---|
| <input type="checkbox"/> Artifacts     | <input type="checkbox"/> Library             | <input type="checkbox"/> Tours                 | <input type="checkbox"/> Research | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Docent/Museum | <input type="checkbox"/> Docent/Nelson House | <input type="checkbox"/> Other (Specify) _____ |                                   |   |

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