LOCATED IN HERITAGE CENTER, 20110 HOLYOKE AVENUE
PHONE: 952-985-4680 WWW.MNLAHS.ORG

Dear Members and Friends of the Lakeville Area Historical Society:

We hope by now that all our members have had an opportunity to attend a free program hosted by the Historical Society at the Heritage Center or have stopped by to watch a video or browse through the many displays. Our display areas have been very popular before and after our programs and during other special events at the building. The displays are constantly changing, so if you haven't visited recently, please stop by to see what's "new" at the Historical Society.

The Historical Society can accomplish its many goals only through our members' support. A 2022 LAHS membership application/renewal form is included below. Please check the address label on this envelope to find your membership expiration date in the upper right corner. If there is no date it means we haven't heard from you in a while; please consider returning as a supporting member.

Individual/family memberships are still just $25.00 and include all members of your household. In addition to the satisfaction of knowing you are supporting the preservation of our rich local history, your membership includes the bimonthly *Heritage Happenings* newsletter, special announcements and invitations, and an opportunity to vote at the LAHS annual meeting. A membership to the LAHS would also make a great holiday gift for a friend or family member.

The LAHS depends exclusively on membership dues and the generosity of our supporters. If you are able, please consider making a financial donation beyond your membership.

**Thank you for your continued support of the Lakeville Area Historical Society.**

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Lakeville Area Historical Society – MEMBERSHIP FORM – 2022
**SUPPORT THE LAHS BY RETURNING THE COMPLETED FORM WITH YOUR DUES**

**Send check payable to "Lakeville Area Historical Society" to 20195 Holyoke Avenue, Lakeville, MN 55044**

**FOR OFFICE USE ONLY**
_____New / _____ Renewal
Date Paid: _____
Amount: _____

**TYPE OF MEMBERSHIP (please check one)**
___ Individual/Family: $25.00 ___ Corporate: $50.00

**PLEASE PRINT:**
Name(s) of individual or family: _____

If Corporate, name of business: _____ Contact Person: _____

Mailing Address: _____ _____ _____ _____
(Street and/or PO Box) City State Zip Code

Phone Number: (____)_____ Email: _____

**Questions? Call 952.985.4680**