

West Bloomfield Historical Society 2019 Membership Application

Name(s)		
Address		
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Telephone		
Please Check a Mem		
Single \$12	Junior/Student \$8	Business \$ 25
Family \$15	Lifetime \$100	_ Senior (60+) \$10
We will hold pro We are als	Our season runs from April to D grams and events on the 1 st and o open by appointment and when the minimal demands on its membe	3 rd Tuesday of the month.
any volunteer help, and	you may volunteer for any of the regular basis. Please check tho	e tasks listed below on a one-
Staffing the exhibitsCleaning and/or maWorking on the So	ents for an event or program	
Memb	ership Year: Ianuary 1st to 1	December 31st

Membership Year: January 1st to December 31st
Make check payable to: West Bloomfield Historical Society
Mail to: P. O. Box 173, West Bloomfield, NY 14585

www.wbhsny.org

Questions? Contact Mary Twardokus, Treasurer 657-7722, mt2152@hotmail.com