



TRUST MEMBERSHIP FORM

Date: _____

Are you already a member?

- No but I'd like to join
- Yes I am a current member

Choose membership level:

- Individual \$25
- Couple \$45
- Corporate \$100
- Individual Life \$500

YOUR INFO

Name: _____
Address: _____
City: _____
State: _____ Zip: _____
Phone: _____
Email: _____

SPOUSE/PARTNER INFO

Name: _____
Address: _____
City: _____
State: _____ Zip: _____
Phone: _____
Email: _____

Please make your check payable to *Somerset County Historical Trust, Inc.*
and mail with this form to:

SOMERSET COUNTY HISTORICAL TRUST

Attn: Membership

PO Box 863

Princess Anne, MD 21853

Thank you !