



Museum

HAMILTON HISTORICAL SOCIETY

49 Mill Street • P.O. Box 482 • Mays Landing, NJ 08330

609-909-0272

HamiltonHistorical.org • HamiltonHistorical@comcast.net



Membership:

Name: _____
(please print)

Address: _____

Town & State: _____

Zip Code: _____

Landline Phone: _____

May we text you:

Cell Phone: _____

yes: _____ no _____

E-Mail: _____

****Your information will be used for only historical society events and business. We do not share our database.****

Please mark your dues level:

Year : (\$20.00) _____ Family: (\$30.00) _____

Lifetime: Individual (\$250.00) _____

Couple (\$400.00)

Interested in Museum volunteering? Please check:
Library: _____ Museum: _____ Events: _____

For society business:

Date received/paid: _____

Paid by: Cash: _____ Check #: _____

Data entry completed: yes _____ no _____ by: _____

Check status: new membership _____ renewal _____