



THE BRIDGEPORT COMMUNITY HISTORICAL SOCIETY

DONATION / MEMBERSHIP FORM

SEPTEMBER 1, 2025 - AUGUST 31, 2026

(Check all that apply: PLEASE PRINT)

This is a: ☐ New Membership ☐ Renewal ☐ Change of Address ☐ Donation

Title: Last Name, First Name M.I.

Street Address

City, State, Zip

Home Phone / Work Phone (include area code please)

Email address (we will not share your email address — Please Print Clearly)

☐ YES - I wish to receive email notifications only! (no mail will be sent to the above address)

Membership Dues

(Please select one)

☐ Individual	\$22.00	☐ Family (2 adults and children under 18)	\$37.00
☐ Student (Under 18)	\$14.00	☐ Lifetime (Individual only)	\$250.00
☐ Senior (Over 65)	\$15.00	☐	

☐ Gift Membership From:

Name: ☐ Gifts to BCHS
\$.00 (tax deductible) \$.00

PLEASE CONTACT AUDREY BLAIR WITH ANY QUESTIONS 203-371-6397

Return your completed
form with payment to:

B.C.H.S.
PO Box 1956
Bridgeport, CT 06601

VISIT OUR WEBSITE AT <http://www.bridgeportcthistorical.org> or find
us on Facebook  <https://www.facebook.com/BCHS88/>

Payment Type	Amount
☐ Cash ☐ Check	
Check #	
Receipt #	Initials