

Randolph Historical Society  
P.O. Box 143  
Randolph, New York 14772

MEMBERSHIP APPLICATION

Full Name(s)

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Address

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City \_\_\_\_\_ State  
\_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Membership  
Category \_\_\_\_\_

Check enclosed for \$ \_\_\_\_\_

Make check payable to the Randolph Historical  
Society and mail to the above address