

Membership Application

BOYLSTON HISTORICAL SOCIETY

Please fill in and return to BHS, P.O. Box 459, Boylston, MA 01505

NAME _____

ADDRESS _____

CITY/TOWN _____

STATE _____ ZIP _____

Telephone _____ E-Mail _____

New Membership ___

Renewal _

Please check one:

Individual \$15 ___

Family \$25.00 ___

Dog Jack \$50 ___

Powder House \$100 ___

Old Pot \$250 ___

Angel \$500 ___

Please note my company offers matching funds: ___

Donations are tax deductible.

Please make checks payable to: Boylston Historical Society

I am interested in volunteering with: *data entry work ___

*becoming a docent ___

*general help ___

Help keep your town's heritage and history alive! Thank you for your membership.