

2019 Membership Form

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone _____

Membership Levels

Student Free

Single \$25 Family \$35

Business \$50 Golden \$100

Lifetime Membership \$300

Employee Matching Funds name & address

I would like to help with :

Activities Building Grounds

Research Programs/Traveling Trunks

Contact us: washingtonilhs@gmail.com

Mail check to : W.H.S. P.O.Box 54

Washington, Il. 61571

Washington-historical-society.org/membership