



**BRISTOL  
HISTORICAL  
SOCIETY**

# MEMBERSHIP RENEWAL

## *JULY 1, 2018 – JUNE 30, 2019*

P. O. Box 1393 / Bristol, CT. 06011-1393

Please fill out form and return with appropriate Membership dues.

Name: \_\_\_\_\_

If this is a Family Membership, please list additional and/or children's names (under 18):

\_\_\_\_\_

Civic Organization/Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile/Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### **Membership Types and Dues:**

- |  |         |                                      |          |
|--|---------|--------------------------------------|----------|
| <input type="checkbox"/> Individual                  | \$30.00 | <input type="checkbox"/> Civic Group | \$100.00 |
| <input type="checkbox"/> High School/College Student | \$10.00 | <input type="checkbox"/> Business    | \$200.00 |
| <input type="checkbox"/> Family                      | \$50.00 |                                      |          |

### ***VOLUNTEER OPPORTUNITIES!***

*Your time and talents are important to us! Along with renovating our beautiful building, we have restructured our Committees.*

*PLEASE NOTE: Starting July 1<sup>st</sup>, we are starting with a 'clean slate'. All previous names have been erased. We are grateful for any support you can provide. If you wish to sign up again, please indicate by numbering 1, 2, and 3, etc. the areas you are interested in helping. That Committee's Chairman will contact you before the event.*

- |                     |   |
|---------------------|---|
| ___ Fundraising     | ___ Marketing   |
| ___ Annual Auction  | ___ Collection Committee  |
| ___ Annual Dinner   | ___ Membership Mailing & Telephoning  |
| ___ Annual Tag Sale | ___ Museum Guide  |
| ___ Christmas Fair  | ___ Program Committee   |
| ___ Event Baking    | ___ Scholarship Committee   |
| ___ Hospitality     | ___ Building & Grounds Upkeep<br><i>(improving &amp; maintaining the premises.)</i> |

Office Use Only: Date \_\_\_\_\_ Payment: \_\_\_\_\_