

Pierce County Historical Association

Membership Form

(12 Month Membership From Date Of Payment)

Name _____

Address _____

City _____ State _____ Zip _____

E-Mail _____ Phone _____

Member Preference (pick 1)

- _____ Regular \$15.00
- _____ Senior/Student \$12.00
- _____ Couple \$20.00
- _____ Business/Professional \$50.00

Chapter Membership Preference (pick 1)

- _____ At Large (no chapter preference)
- _____ Mississippi River Bluffs
- _____ Prescott
- _____ River Falls
- _____ Spring Valley

In addition to my membership dues an optional donation of \$ _____ is enclosed for: (check one)

- | | |
|--------------------------------------|---------------------------|
| _____ General Expense Fund | _____ Archives Fund |
| _____ Facilities Capital Fund | _____ Museum Capital Fund |
| _____ Ira, George, & John Smith Fund | _____ Endowment Fund |
| _____ Other _____ | _____ To My Chapter |

If donation is a Memorial, please give person's name _____

You may pay your dues directly to your Chapter or mail them to: PCHA Office, P.O. Box 148, Ellsworth, WI 54011. Please make your check payable to PCHA (Pierce County Historical Association).

THANK YOU FOR YOUR SUPPORT!!!!

Rev Jan 2012