



Membership Application and Renewal

PLEASE Use a Pen and PRINT

1. Select a membership level.

| Membership Level | Dues | <input checked="" type="checkbox"/> |
|---|---------|-------------------------------------|
| Dues PER YEAR: January through December | | |
| Business | \$40.00 | |
| Family | \$25.00 | |
| Individual | \$15.00 | |
| | | |

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2. Complete form as needed.

____ Renewal member: Enter **YOUR NAME** and **TODAY'S DATE**. Update any changes.

Check this box if there are NO changes in your last-year information.

____ NEW member: Please complete **ALL INFORMATION BELOW**.

PLEASE PRINT

Name: _____ Date: _____

Family Members, if applicable: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email address: _____

Preferred Phone #: _____

YES, interested in volunteer opportunities. Our Volunteer Coordinator will contact you.

Please make check payable to **MARICOPA HISTORICAL SOCIETY**
and return this form and your cash or check payment to:

Maricopa Historical Society
PO Box 902
Maricopa, Arizona 85139

For Credit Card payment, go online to www.MaricopaHistory.org/Membership

| | | |
|--|---------------|-------------------------|
| MHSoc Only | \$_____ Cash; | \$_____ Check #: _____; |
| \$_____ Charge; Credit Card name AND last 4#: _____ VISA; _____ MC; _____ AMEX; | | |
| WHITE/Membership; email photo Volunteer Coordinator; YELLOW/Finance; PINK/PP5 data input; GOLD/Secretary | | |