

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

E-Mail: _____

I / We wish to join the WCHS at the following membership level:

- Individual\$20.00+
- Couples\$30.00+
- Family/Grandparent\$40.00+
- George Ebbert Society\$50.00+
- Joseph Gale Society\$100.00+
- Joseph Meek Society\$250.00+
- Tabitha Brown Society\$500.00+
- Director's Circle\$1,000.00+
- I will increase my gift by using my company's matching program

I wish to make a tax-deductible contribution of \$_____.

- My check, made payable to WCHS is enclosed
- Please charge my credit card: Visa MC

Card# _____

Exp. Date _____

Signature _____

\$_____ total amount of check/or to be charged to my credit card.

Please make checks payable to:

Washington County Historical Society

Annual membership gifts are tax-deductible to the full extent permitted by law.