

Application for Membership

Name			_			
Address			_			
City	_ State	Zip				
Telephone	_ Cell		_			
E-mail			_			
(preferred						
Membership Category You Prefer						
□ Annual \$20.00 per person per year						
□ One-time \$100.00 pe	r person li	fe membe	ership			
Signature						

Please mail this application with your personal check or money order to:

The Mauricetown Historical Society Post Office Box 1 Mauricetown, NJ 08329

The Mauricetown Historical Society is a nonprofit organization and all dues are tax deductible within the limits of the Laws of the United States of America, Internal Revenue Service Code and the State of New Jersey Division of Taxation.

Please consult a tax specialist for additional information.

Privacy Statement - The Society collects the information on this and other forms for use only within our own organization and for our members to make contact with other members. No information, including names, addresses, telephone numbers, cell phone numbers, or email addresses, is shared or sold to any outside person, organization, sales or special promotion firm, or data gathering service.