



**MEMBERSHIP/RENEWAL APPLICATION**

Dues for Year \_\_\_\_\_

New  Renewal

**Membership Category**

- Life \$200
- Corporate \$150
- Benefactor \$100
- Family \$25
- Individual \$20

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

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

**Method of Payment**

\_\_\_ **Check:** Please make payable to the **Summit Historical Society**

\_\_\_ Please bill my **Credit Card:** Visa  MasterCard  American Express  Discover

**Account #:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_ **CVV:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

Matching Gift Employer Name \_\_\_\_\_  
[please send completed employer form]

**Volunteer Opportunities**

*I am interested in (please √ all applicable)*

- \_\_\_ Carter House Docent
- \_\_\_ Research
- \_\_\_ Archiving
- \_\_\_ Scanning Photos & Documents
- \_\_\_ Other \_\_\_\_\_
- \_\_\_ Holiday Boutique Committee
- \_\_\_ Taste of Summit Committee
- \_\_\_ Four Centuries Weekend
- \_\_\_ Selected Small Projects

Please return to: Summit Historical Society, P.O Box 464, Summit, NJ 07902-0464