

# HIGH SPRINGS HISTORICAL SOCIETY, INC.

23760 NW 187<sup>th</sup> Ave.  
High Springs, FL 32643

## MEMBERSHIP APPLICATION

**Dues** (January – December – Full Year)

\_\_\_\_\_ \$15.00 Individual

\_\_\_\_\_ \$20.00 Family

\_\_\_\_\_ Check

\_\_\_\_\_ Cash

(Please Print)

Name \_\_\_\_\_

Street Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (Home and/or Cell) \_\_\_\_\_

\*\*\*Must Have This Information\*\*\*

Email \_\_\_\_\_

Volunteer to Open & Close & Operate Museum ONE weekend a month: YES \_\_\_\_\_ NO \_\_\_\_\_

Please make checks payable to: High Springs Historical Society , Inc. **Mailing Address:** P.O. Box 1711,  
High Springs, FL 32655-1711

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### FOR USE BY HIGH SPRINGS HISTORICAL SOCIETY STAFF ONLY:

Amount \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_

Received from \_\_\_\_\_ For Year \_\_\_\_\_

Staff Signature \_\_\_\_\_ Date \_\_\_\_\_

