



Membership Registration

Member #1

Mr. /Mrs. /Ms. /Dr./Other: _____

Name _____

Member #2

Mr. /Mrs. /Ms. /Dr./Other: _____

Name _____

Address _____

City/State/Zip _____

Phone _____

Email _____

Please indicate your preferred membership.

- | | |
|--|---|
| <input type="checkbox"/> Individual, \$30 | <input type="checkbox"/> Family, \$50 |
| <input type="checkbox"/> Supporter, \$75 | <input type="checkbox"/> Cornerstone, \$125 |
| <input type="checkbox"/> Benefactor, \$250 | <input type="checkbox"/> Patron, \$500 |
| <input type="checkbox"/> Directors' Circle \$1,000 | |

Discounted membership* (new members only)

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Individual, \$20 | <input type="checkbox"/> Family, \$40 |
|---|---------------------------------------|

Specify type (educator, veteran, or student): _____

Payment Amount Enclosed: \$ _____

- Check enclosed (*Payable to SLCHS*)
- Please bill my credit card: MasterCard Visa

Name of cardholder: _____

Card number: _____ - _____ - _____ - _____

Expiration Date: _____ Back code: _____

Signature: _____

Mail your membership registration to:

St. Louis County Historical Society
506 West Michigan Street
Duluth MN 55802

For more information, please call 218-733-7568, or e-mail julie@thehistorypeople.org.

**Please see the discounted memberships section for requirements.*