

# Woodstock Historical Society Membership Application Form

Name(s):

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Address:

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Telephone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

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I wish to become a member of the Woodstock Historical Society:

Annual Membership \$20.00 per year Per Person ..... \$ \_\_\_\_\_

Life Membership \$500 Per Person ..... \$ \_\_\_\_\_

In addition to my membership dues, I wish to make a contribution of ..... \$ \_\_\_\_\_

Total enclosed: ..... \$ \_\_\_\_\_

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Help us know your areas of interest in the activities of the Woodstock Historical Society:

Programs\_\_\_ Collections\_\_\_ Exhibits\_\_\_ Genealogy\_\_\_ Building & Grounds Care\_\_\_

Newsletter\_\_\_ Hospitality\_\_\_ Special Events\_\_\_ WEB\_\_\_

Other\_\_\_\_\_

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Print this form, fill it out and mail with your check to:

Woodstock Historical Society  
ATTN: Beverly Brazeal  
PO Box 65  
Woodstock, CT 06281