



CUTTYHUNK HISTORICAL SOCIETY, Inc.

Serving the Elizabeth Islands

P.O. Box 181, Cuttyhunk, MA 02713

508.984.4611 www.cuttyhunkhistoricalsociety.org

Membership Application

The Membership year runs from June 1st- May 31st.

Member name _____

Address: _____

City/State/Zip: _____

Email: _____ phone: _____

Please check one: New Member Renewing Member

Membership Levels

- | | |
|--|--------|
| <input type="checkbox"/> Junior (21 and under) | \$10 |
| <input type="checkbox"/> Individual | \$30 |
| <input type="checkbox"/> Family | \$50 |
| <input type="checkbox"/> Senior (65 and over) | \$15 |
| <input type="checkbox"/> Sponsor | \$100+ |

I would like to add a gift membership:

Name _____

Address: _____

City/State/Zip: _____

Email: _____ phone: _____

Please check one: New Member Renewing Member

Membership Levels

- | | |
|--|--------|
| <input type="checkbox"/> Junior (21 and under) | \$10 |
| <input type="checkbox"/> Individual | \$30 |
| <input type="checkbox"/> Family | \$50 |
| <input type="checkbox"/> Senior (65 and over) | \$15 |
| <input type="checkbox"/> Sponsor | \$100+ |

I would like to make an additional donation:

In Honor of _____ \$ _____

In Memory of _____ \$ _____

Tarpaulin Cove Lighthouse Fund \$ _____

Additional Gift \$ _____

YES, my employer has gift matching. I am enclosing a matching gift form.

YES, I am interested in volunteering. Please contact me.

Please make checks payable to Cuttyhunk Historical Society, Inc. and mail to Cathy Ford, P.O. Box 150, Cuttyhunk, MA 02713. Questions? Call (508) 984.4611 (summer only) or email membership@cuttyhunkhistoricalsociety.org.

CHS is a 501.c.3. organization and contributions are deductible to the extent allowed by law.

Thank you for supporting the Cuttyhunk Historical Society.