

CRANBURY HISTORICAL & PRESERVATION SOCIETY

MEMBERSHIP APPLICATION

| Name: | Date: | |
|--|--|--|
| Address: | | |
| City, State, Zip: | | |
| Phone: | _ Email Address: | |
| ** YES I want to become a member** | | |
| Matching gifts are a significant source | Patron - \$50.00 Corporate \$150.00 Other organization. Contributions are deductible to e of support for the Society. If you work for, on ations, please ask your personnel office for a | or have retired from, a |
| Volunteer Opportunities: Museum DocentEducational ProgramsFall Plant SaleHouse TourWassail Tour | Museum Inspectors Memorial Day Parade History Center Fundraising Projects Other | Walking Tours Drug Free Fair Museum Garden Membership |
| | uld like to receive your newsletter: _US Mail | |
| Mail completed form to: | | |
| CHPS, 6 South Main St., Cran | bury, NJ 08512 Attn: Membership | |

Or pay online at www.cranburyhistory.org