

GRUNDY COUNTY HISTORICAL SOCIETY MEMBERSHIP APPLICATION

Date: _____

Full name: _____

Mailing address: _____

City: _____ State: _____ Zip code: _____

Email: _____

Primary phone: _____ Cell: _____

MEMBERSHIP

Select one:

_____ Membership is \$30.00 per year. *The Pathfinder* will be distributed electronically by email only.

_____ Paper copies of the *The Pathfinder* delivered by USPS quarterly is an additional \$15.00, for a total of \$45.00.

Membership entitles a member to receive *The Pathfinder* quarterly and to vote in the affairs of the Membership. Membership expires on Dec. 31.

Members agree to receive Society business communications via email.

Annual Fund Donation

Tax deductible donation to Grundy County Historical Society \$ _____

(Annual Fund donations are for building operating expenses for the Heritage Center.)

Payable to:

Grundy County Historical Society

P.O. Box 1422

Tracy City, TN 37387

Total enclosed \$ _____ (membership and/or Annual Fund donation)

Become a Volunteer

I would like to help:

___ Museum Tour Guide

___ Photography

___ Library Attendant

___ Publication Assistant

___ Cataloging

___ Other

___ Work Crews

___ Organization and maintenance (includes computer scanning and indexing)

THANK YOU