

## LHS Membership Form

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Type of membership \_\_\_\_\_

\*\*Email address \_\_\_\_\_ (\*\*(We do not share our email address list)

<b>Annual Dues</b>	Family:	\$20	Senior Family:	\$15	Sustaining:	\$30 - \$100
	Individual:	\$15	Senior Individual:	\$10		

Please send check and membership form to:  
Lima Historical Society Membership Chair, PO Box 532 Lima NY 14485