

Brooks Historical Society Membership Application/Renewal

New member Renewal Member	
Name: (Please check box and print name)	
Primary Member:	
Address:	
Email: Phone:	
I/We want to be a member of Brooks Historical Society! Here are our yearly dues. \$20 for each active member (I/We will work 4 six-hour shifts each per year special event helper, or other volunteer work. I have included full contact in \$50 for each supporting member (no work required)	as docent,
In addition – I'd like to help out Brooks Historical Society with a donation of:	
\$500 \$250 \$100 \$50 \$25 Other \$_	
I'd like my donation/gift to go towards: Wherever the need is greatest! Other	
Total Amount – Membership plus donation \$	
I want to have fun, meet others and contribute to the success of Brooks Historical contact me about volunteer opportunities: Hosting/Docent Maintens Office Work Interpretive Displays Website or Facebook M Special Event Planning and Hosting Submit to: Brooks Historical Society.	ance/Landscape
PO Box 9265	
Brooks, OR, 97305.	
Signature: Date:	
For Office Use Only: Date Received By Amount \$ For Year Check # Cash	_