

Macon County Historical Society

Membership Form

All dues and donations are tax deductible

Name: _____ Date _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

In our effort to maintain the building, including continued restoration and upkeep, we are requesting your help as follows:

1. _____ Membership is \$10 for individual or \$15 per family. (Used for electric and water bills)
2. _____ Additional donation above membership. (Used for continued restoration projects)
3. _____ Please check if you are willing to volunteer to help at the museum. We will contact you to find your area of interest.

Payment to be made to **Macon County Historical Society** or **MCCHS**.

Thanks so much for joining. Your support is appreciated.

Please return to :

Macon County Historical Society
P.O. Box 304
Macon, MO 63552