



BELLAIRE HISTORICAL SOCIETY

P. O. Box 854 • Bellaire, Texas 77402
www.BellaireHistoricalSociety.org

Please complete this membership application form and return it with your dues so you will be on our mailing list to receive notices for meetings, programs and activities during the year. Please make checks payable to “Bellaire Historical Society” and return with this form as soon as possible to:

Bellaire Historical Society, P O Box 854, Bellaire, TX 77402-0854. Thank you.

Membership Application June 1, 2016- May 31, 2017

Date Submitted: _____

Name:

Spouse/Partner:

Address:

City, State, Zip:

Phone (home):

Phone (work):

Phone (cell):

Provide your: Email Address: _____

Use my email for BHS communications

Membership Classes, please check your choice:

- | | | |
|---------------------------------------|---|--|
| <input type="checkbox"/> \$10 Student | <input type="checkbox"/> \$40 Couple | <input type="checkbox"/> \$200 Individual LIFETIME |
| <input type="checkbox"/> \$20 Single | <input type="checkbox"/> \$100 Business | \$_____ Donation |

Also, mark activities you are interested in and/or where you would like to be of help:

- | | | |
|--|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Research projects | <input type="checkbox"/> Database | <input type="checkbox"/> Finance |
| <input type="checkbox"/> Telephoning | <input type="checkbox"/> Refreshments | <input type="checkbox"/> Fund raising |
| <input type="checkbox"/> Programs | <input type="checkbox"/> Publicity | <input type="checkbox"/> Website |