



St. Francis Historical Society

Application for Membership

Name _____

Address _____

City, State, Zip _____

Telephone _____

Email _____

Annual Dues

___ **Individual** \$ 8.00

___ **Family** \$ 10.00

___ **Non-Profit/Small Business** \$ 5.00

___ **Corporate** \$ 100

I Would like to receive the newsletter by: _____ Regular Mail, or

_____ email

Checks payable to **St. Francis Historical Society**. Membership runs Jan. 1 to Dec. 31

Return to: St. Francis Historical Society
c/o Barbara Janiszewski
4007 S. Lipton Ave.
St. Francis, WI 53235

Questions? Email us: sf.francishistoricalsociety@gmail.com