



ANNUAL MEMBERSHIP APPLICATION

Please mail this form with your payment or apply online at our secure website www.parkridgehistorycenter.org

PLEASE PRINT: New ___ Renewal _____

Name & Address _____

Email _____

Phone _____

Today's Date _____

Annual Membership Levels (January - December):

Individual	\$35
Senior (60+)	\$25
Family	\$50
Friend	\$100
Pennyville	\$250
Brickton	\$500
Buchheit	\$1,000
Business	\$300

Please make your check payable to Park Ridge Historical Society OR complete the credit card information:

Name on credit card: _____

Credit card number: _____

Exp. Date: _____ CVV _____

Signature: _____

Please return this form with your payment to:

Park Ridge Historical Society - 721 N Prospect Avenue - Park Ridge, IL 60068

THANK YOU FOR YOUR SUPPORT!