

Olmsted Historical Society Membership Form

Adults: \$10.00 per year

Junior Membership (under 18): \$5.00 per year

Family Membership: \$25.00 per year

Business Membership: \$50.00 per year

Lifetime Membership: \$100.00

NAME _____

ADDRESS _____

TELEPHONE _____

EMAIL _____

Please mail the completed form and your membership check to:

- Olmsted Historical Society
- P.O. Box 38144 Olmsted Falls, Ohio 44138
- Phone: 440-779-0280

If you would like to make a donation, please mail your contribution to the Society.

Tax Deductible Donation: _____

Check Number: _____

Retain this portion for you records if making a Tax Deductible donation to the **Olmsted Historical Society**.

Amount Donated: _____

Check Number: _____

Date: _____