Harrison Township Historical Society PO Box 4 Mullica Hill, NJ 08062 856-478-4949



MEMBERSHIP FORM Please Print Clearly.

NAME			
(Please list all the additional na	ames if applying for a Fa	mily/Household membership.)	
STREET ADDRESS			
CITY		STATE	ZIP
HOME PHONE		CELL PHONE	
E-MAIL ADDRESS*			
* We respect our members pri announcements and other co		t their e-mail addresses. Meml pt out at any time.	pers are blind CC'd event
STUDENT (K-12 & College)	\$5 per person		
SENIOR (55 & over)	\$5 per person		
INDIVIDUAL	\$10 per person		
SUPPORTING	\$25 per person		
FAMILY/HOUSEHOLD	\$35		

Please make checks payable to HTHS and remit to the address above.

Thank you for helping us Make History Happen!