

Lexington Historical Society Membership Application:

Yes, I would like to join the Lexington Historical Society. Please sign me up for membership at the following level:

Membership Levels

- Individual \$35
- Household \$50
- Contributor \$125
- Supporter \$250
- Sponsor \$500
- Benefactor \$1,000
- 1775 Society \$1,775



Name _____
Street/ Apt # _____
City/ Town _____ State _____ Zip _____
Telephone _____
Email _____

Check made payable to *Lexington Historical Society*

Amount of check enclosed: _____

VISA MasterCard

Credit Card Number: _____ Expiration Date: _____

Name on Card: _____

Signature: _____ Amount: _____

Please print and mail form to:
The Lexington Historical Society
P.O. Box 514
Lexington, MA 02420