

Historical Society of Carroll County
CORPORATE
Membership Form

New Membership _____

Membership Renewal _____

Name of Business: _____

Primary Contact: _____

Address: _____

City, State, Zip: _____

Phone Number: (W) _____ (C) _____

E-mail: _____

Website: _____

___I or my staff may be interested in volunteering. Please contact me.

Corporate Membership Level

Corporate - {\$250}

Payment Method

Check [enclosed] _____

Visa _____

Mastercard _____

Discover _____

Account Name _____

Account Number _____

Expiration Date _____

Cardholder's Signature _____

Please return this form with payment to your Personal Volunteer Contact or to:

Historical Society of Carroll County
210 E. Main Street
Westminster, MD 21157
410-848-6494 / fax 410 848-3596
Website: hssc.carr.org