



# THE LEAGUE OF HISTORICAL SOCIETIES OF NEW JERSEY

## MEMBERSHIP APPLICATION

(To join online visit [www.lhsnj.org](http://www.lhsnj.org) and click on “Join the League.”)

**Organization Member**       New membership    Renewal  
**(\* required)**

Name of Organization \* \_\_\_\_\_

Address \* \_\_\_\_\_

City, State, Zip \* \_\_\_\_\_ County \_\_\_\_\_

Organization website \_\_\_\_\_

Organization email \* \_\_\_\_\_

Phone \_\_\_\_\_

Number of members \* \_\_\_\_\_ # volunteers \* \_\_\_\_\_ # staff members (if none enter 0)\* \_\_\_\_\_

President’s Name \_\_\_\_\_

Delegate # 1 Name \_\_\_\_\_

Address \_\_\_\_\_

Email address\* \_\_\_\_\_

Delegate # 2 Name \_\_\_\_\_

Address \_\_\_\_\_

Email address \_\_\_\_\_

### Individual/Business Member

Name\* \_\_\_\_\_

Business Name\* \_\_\_\_\_

Address\* \_\_\_\_\_

City, State, Zip\* \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \* \_\_\_\_\_

- Individual \$ 15.00       Organization \$ 40.00       Supporter \$100.00       Patron \$250.00
- Benefactor \$1,000.00       Business Member\*\* \$500.00       Additional Donation

**Make check payable to LHSNJ and mail to LHSNJ, c/o Pary Tell, 397 Corson Lane, Cape May, NJ 08204**

**\*\* Includes a 1/4 page (4.25 x 5.5) ad in 3 annual issues of the League newsletter. Contact [barthlinda123@aol.com](mailto:barthlinda123@aol.com) for more information.**