

Become A Member of the Southwick Historical Society, Inc.

Membership Application

Date: _____, 20____

Being interested in the history of Southwick, I hereby apply for membership in the Southwick Historical Society, Inc. and agree to be bound by its Constitution and By-Laws. The sum of \$_____ accompanies this application as payment for dues for the year ending May 31, 2026.

Name: _____

Address: _____

Telephone: (_____) _____

Email: _____

Membership Categories:

_____ \$25.00 Annual for Individual

_____ \$10.00 Annual for Student

_____ \$40.00 Annual for Family

_____ \$250.00 Life Membership

I wish to contribute to "The Southwick History Museum"

\$10 \$50 \$100 \$200 _____

All contributions are tax deductible and receipts will be provided for income tax purposes.

Please mail to the Treasurer:

Southwick Historical Society Inc.

P.O. Box 323

Southwick, MA 01077