

Stirling City Historical Society Membership Application

I would like to join or renew my membership as:

___ \$15 Individual ___ \$25 Family ___ \$250 Life Membership (-55+) ___ \$100 Business Membership

I would like to make a special donation for: _____

I would like to make a general donation to the SCHS: _____

Name: _____

Address: _____

Phone Number: _____

Email: _____

Send to: **Stirling City Historical Society, P.O. Box 6, Stirling City, CA 95978**