

## MEMBERSHIP APPLICATION

---

Name: \_\_\_\_\_

New Member       Renewing Member

Address: \_\_\_\_\_

(check type of membership desired)

\_\_\_\_\_

Regular . . . . . \$20/yr

\_\_\_\_\_

Family . . . . . \$35/yr

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Senior (62+) . . . . . \$15/yr

Telephone: \_\_\_\_\_

Patron\* . . . . . (over \$100/yr)

Email: \_\_\_\_\_

Life . . . . . \$400/yr

\*A Patron Member is a financial supporter of BCHS for one year  
Call or Email BCHS if you are interested in Volunteer Opportunities – we welcome your help!

---