



Membership Application

Western Springs Historical Society

Box 139

Western Springs, IL 60558

708-246-9230

Name _____

Street _____

City/State/Zip _____

Telephone Number _____

Email _____

I would like to help:

Typing/Filing

Displays

Genealogy

Children's museum

Membership

Archival Records

Museum Docenting

Publicity

Fund Raising

Other:

Membership Dues (Annual) Please circle one

Patron \$100

Sustaining member \$50

Business \$30

Family \$25

Individual \$10

Special Gift \$ _____

Lifetime Member \$500

Credit Card (please circle) MasterCard Visa

Exp _____

Sec code _____

(The three digit number on the back the card)