

Name: Mr. Mrs. Ms. \_\_\_\_\_

Spouse or Partner: Mr. Mrs. Ms. \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_

E-Mail \_\_\_\_\_

- Enclosed is a check made out to The Historical Society of the Town of Warwick
- Please charge my membership to my Visa or Master Card account

Account # \_\_\_\_\_ Expiration Date \_\_\_\_\_ V-Code \_\_\_\_\_

Signature \_\_\_\_\_

**Select your membership level:**

- Student \$10
- Individual \$ 50
- Household/Dual \$ 100
- Senior Individual (62+) \$ 35
- Senior Dual \$ 50
- Business/Contributor \$ 150
- Donor \$ 200
- Patron \$ 500
- Benefactor \$ 1,000

## Membership Form

Thank you for your membership support.  
Membership entitles you to a  
10% discount at the Gift Shop at Baird's Tavern,  
and discounted tickets to Society events.

I am interested in volunteering for

- |  |                                      |
|--|--------------------------------------|
| <input type="checkbox"/> Special Events      | <input type="checkbox"/> Archives    |
| <input type="checkbox"/> Membership          | <input type="checkbox"/> Artifacts   |
| <input type="checkbox"/> Education           | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Buildings & Grounds | <input type="checkbox"/> Costumes    |

For more details about each volunteer area please go to our web site at [warwickhistoricalsociety.org](http://warwickhistoricalsociety.org) or call (845) 986-3236.