



The  
**London & Middlesex  
Historical Society**

## Membership Application

Individual Name or Organization Contact \_\_\_\_\_

Position/Title *(where applicable)* \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/Town \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email Address \_\_\_\_\_ @ \_\_\_\_\_

Please Check: New Membership                      Renewal

Membership Fee                      \$25.00

Donation *(tax receipt available)* \_\_\_\_\_

Total amount enclosed                      \_\_\_\_\_

Please make cheques payable to                      **The London and Middlesex Historical Society**

Mail to                      Box 303, Station B  
London, ON  
N6A 4W1

*Complete this form, save to your own computer then print and mail with your payment.*