

## Membership Application

Individual Name or Organization Contact	
Position/Title (where applicable)	
Mailing Address	
City/Town	Postal Code
Phone	Call
Email Address	0
Please Check: New Membership Renewal	
Membership Fee \$30.0	00
Donation (tax receipt available)	
Total amount enclosed \$	
Please make cheques payable to The	e London and Middlesex Historical Society
Lor	x 303, Station B ndon, ON A 4W1