



Membership Form

New member Renewal
 Family Individual Lifetime
 Please Print. Add all family member names.
 Update all information.

Date _____

	Individual/First person family membership	Second person, family	Third person, family, add' family on back
Title	_____	_____	_____
Nick name	_____	_____	_____
Name First	_____	_____	_____
Name Middle	_____	_____	_____
Name Last	_____	_____	_____
Name Maiden	_____	_____	_____
Cell Phone	_____	_____	_____
Email	_____	_____	_____

We will invite you to join our mailing list at Yahoo Groups.

Phone, Home _____
 Address Line 1 _____
 Address Line 2 _____
 City _____
 State _____ Zip _____

Privacy statement: we do not share personal information.

Office use only	Membership dues received. \$10 individual (annual) \$20 family (annual) \$ ____ Lifetime membership (no annual dues)
_____	Received by
_____	#Reunion
_____	#Person
_____	#Discovery Research
Please forward information to Gloria Ringdhal (all dues to Gloria) Bill Duncan	

I'd like to make an additional \$ _____ donation to go towards _____

I'd like to volunteer for: _____

Memorial Donation to Laden (Storage Barn)

In Memory of: _____

By (all names involved): _____

Amount of donation _____

Make checks payable to New Sweden Historical Society
Mail to: PO Box 33, New Sweden, ME 04762