



# MEMBERSHIP

Cohasset Historical Society | P.O. Box 627 | Cohasset, MA 02025 | 781.383.1434 | info@cohassethistoricalsociety.org | CohassetHistoricalSociety.org

## MEMBER INFORMATION

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

City | State | Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

## MEMBERSHIP TYPE *(please check one)*

New Membership       Renewal

## MEMBERSHIP CATEGORIES *(please check one)*

Supporter \$50       Sponsor \$100       Patron \$500       Benefactor \$1,000

## CONTRIBUTIONS

I would like to make an additional tax-deductible contribution of \$ \_\_\_\_\_

My contribution should be acknowledged as follows *(it will be displayed on the permanent Donor Plaque at the Pratt Building)*

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

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

## MY GIFT IS

in memory of \_\_\_\_\_

in honor of \_\_\_\_\_

Please mail this form and your check payable to *Cohasset Historical Society* to: Cohasset Historical Society, PO Box 627, Cohasset, MA 02025