

Membership Application Form 2020

Name(s) (please print):
Address:
City, State, Zip:
Гelephone:
Email (s):
□ I prefer to receive meeting notices by email.□ I prefer to receive meeting notices by postal mail.
Membership category:
 \$35 Individual \$50 - Joint \$100 - Corporate / Dealer Supporting \$250 - Sustaining \$500 - Sponsor \$1000 - Lifetime
Please mail with check/money order payable to San Francisco History Association to:
San Francisco History Association, Attn: Membership P.O. Box 31907 San Francisco, CA 94131

Annual dues cover the calendar year January through December. Dues are not prorated.