



# Membership Application

Please mail to: PO Box 54, Hartland, WI 53029

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Dues are as follows (Make checks payable to **Hartland Historical Society**):

Single: \$10 / year     Family: \$15 / year     Senior: \$7 / year     Senior Family: \$10 / year

Additional Funds Donated \_\_\_\_\_

Any additional funds donated is greatly appreciated! Thank you for supporting the Hartland Historical Society!