

CHAMPION/BEACON/HUMBOLDT HISTORICAL SOCIETY

Name(s) _____ Date _____

Address _____ Phone No. (____) _____

City/State/Zip _____

e-mail _____

(Enter alternate phone numbers and/or seasonal contact info on back)

Special Historical Interests

Membership (Year ending 12/31/15) ___New ___Renewal

___ Individual (\$15.00) ___ Commercial (\$25.00)

___ Family (\$25.00) ___ Lifetime (\$150.00) *Special Donation to be applied to*

___ Junior (\$5.00) ___ Lifetime Spouse (\$100.00) *book publishing costs \$ _____*

Total payment: Cash (Amt.) \$ _____ Check to CBHHS (No. _____) Amt. \$ _____

(Submit with payment to: Ken Saari, Treasurer CBHHS, 3309 CR 496, Ishpeming, MI 49849)