



# Membership Application

ILLUMINATING ST. HELENA'S HISTORY

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

Business or Organization \_\_\_\_\_

How would you like your name(s) to appear? \_\_\_\_\_

Mailing Address \_\_\_\_\_

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

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

## ***Membership Level***

- |  |  |
|--|--|
| <input type="checkbox"/> Individual \$50 | <input type="checkbox"/> Business \$500      |
| <input type="checkbox"/> Family \$100    | <input type="checkbox"/> Life Member \$1,000 |
| <input type="checkbox"/> Supporter \$250 |  |

***Make check payable to St. Helena Historical Society and mail to:  
St. Helena Historical Society, P.O. Box 87, St. Helena, CA 94574***

## ***Volunteer help is always welcome!***

Please check areas of interest:

- Event set up or other help on day of an event.
- Museum docent, with training, once/month or occasionally.
- Committee: (circle one) Collections, Membership, Newsletter, Program.
- I want more information about volunteer opportunities, please call me.

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ST. HELENA HISTORICAL SOCIETY • FOUNDED 2002

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