



[www.historiceffinghamociety.org](http://www.historiceffinghamociety.org)

Historic Effingham Society, Inc.  
Membership Application

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

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

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

Telephone: \_\_\_\_\_

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

Special Interests: \_\_\_\_\_

Individual: \_\_\_\_\_  
\$20.00 Yr. (Check Above)

Family: \_\_\_\_\_  
\$25.00 Yr. (Check Above)

Student: \_\_\_\_\_  
\$10.00 Yr. (Check Above)

Life Membership: \_\_\_\_\_  
\$200.00 Each (Check Above)

Business: \_\_\_\_\_  
\$75.00 Yr. (Check Above)

Corporate: \_\_\_\_\_  
\$150.00 Yr. (Check Above)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please make check out to: Historic Effingham Society, Inc.  
Mail to: P O Box 999, Springfield, GA 31329