

you are invited
TO JOIN THE SBHS

Just mail the completed information form and a check made out to the South Brevard Historical Society for the membership of your choice to:

South Brevard Historical Society
P O Box 1064
Melbourne, FL 32902-1064

Name

Apt/Unit

Street Address

City

State

Zip Code

Phone

Email Address

Do you want to receive your Newsletter electronically rather than by mail:

yes _____ no _____

New _____ Renewal _____ Gift Membership sent by _____

Annual Membership Levels

Individual **\$20.00**
Family/Library **25.00**
Senior/student **10.00**
Business **50.00**

Membership amount \$ _____

Donation \$ _____

Total Enclosed \$ _____

Life Membership **\$250.00**

Please do not send cash

I would like to help with:

artifacts _____ exhibits _____ programs _____

I can be a resource person. My background is: _____