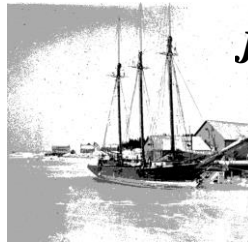


**Membership Form
2025 (W)**



***Jonesport
Historical Society***

***"Preserving
Our Heritage"***

Please print all information clearly. Use a separate form for each person. Membership is 5.00 per year per person.

Name _____

Maiden Name (optional) _____ Phone (required for ID) _____

Mail Address _____

Town _____ State _____ ZIP _____

E-Mail _____ Contact me about volunteering

\$ 5.00 2025 Membership
\$ _____ 2026 Membership (\$5.00)
\$ _____ 2027 Membership (\$5.00)

Make check payable to *Jonesport Historical Society*
Mail to: Jonesport Historical Society
P.O. Box 603
Jonesport, ME 04649

Tax Deductible Donation: ___ \$10 ___ \$25 ___ \$50 ___ \$100 ___ \$500 _____ Other

\$ _____ Total Amount
