

Chesterfield Township Historical Society

P.O. Box 86
2 Front Street
Crosswicks, NJ 08515

MEMBERSHIP FORM

NAME _____

ADDRESS _____

PHONE _____

E-Mail _____

**Your membership entitles you to a discount at
Chesterfield Township Historical Society events.**

_____ **INDIVIDUAL MEMBERS @ \$20.00** = _____

_____ **FAMILY @ \$30.00** = _____

ADDITIONAL DONATIONS

\$50.00 _____

\$75.00 _____

\$100.00 _____

TOTAL ENCLOSED \$ _____

**PLEASE MAKE CHECK PAYABLE TO:
CHESTERFIELD TWP. HISTORICAL SOCIETY (CTHS)
P.O. BOX 86, CROSSWICKS, NJ 08515**