

Spring-Ford Area Historical Society

[SFAHS is a 501 (c) (3) non-profit organization]

MEMBERSHIP APPLICATION FORM – (check one) ___ NEW ___ RENEWAL

Membership helps us further our mission of preserving the past for the future.

Name: _____

Street Address: _____

City, State & Zip: _____

Phone No. _____ Email Address: _____


Support SFAHS's year-long effort to preserve and promote the area's history by including a tax-deductible gift.

Membership Options
Check one:

- Individual Member - \$15
- Family Membership - \$25
- Business Membership - \$50
- Individual Life Membership - \$250

I value the work of the society!
Please accept this additional gift:

- \$25
- \$50
- \$100
- Other: \$ _____



_____ Check enclosed in the amount of \$_____, payable to SFAHS

_____ Credit card payment* – Payment Amount: \$_____

NAME ON CREDIT CARD

CARD NUMBER

CVV

EXP. DATE (MM/YY)

ZIP CODE FOR CARD

*A convenience fee of 4% is added to credit card purchases.

You can also join/renew online at www.sfahs.com. Buttons for both are on the home page.

To pay using PayPal, go to paypal.me/SFHistoricalSociety, and note "Membership"

Make checks payable to: "Spring-Ford Area Historical Society" or "SFAHS"

Send form to: SFAHS, P.O. Box 312, Royersford, PA 19468

I/We would like to volunteer for:

- Museum Co-Hosting
- Special Events
- Research
- Other _____