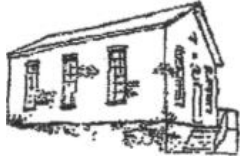


LEHIGH TOWNSHIP HISTORICAL SOCIETY



3811 Lehigh Drive
Northampton, PA 18067-9612



610-440-0151
www.lehightownshistoricalociety.org

SUPPORTING MEMBER APPLICATION – *effective 2026*

Name(s) _____

Address _____

City _____ State _____ ZIP _____

Phone # _____ Cell # _____

E-Mail(s) _____

Please check any ways you are able to help the society:

- | | |
|---|--|
| <input type="checkbox"/> Board of Directors member | <input type="checkbox"/> Program and Event Planning |
| <input type="checkbox"/> Volunteer at Fundraising Events | <input type="checkbox"/> Research and Genealogy |
| <input type="checkbox"/> Baking for Bake Sales | <input type="checkbox"/> Maintenance and Repairs |
| <input type="checkbox"/> Museum Greeter / Host | <input type="checkbox"/> Cleaning Museum and School |
| <input type="checkbox"/> Cataloging and Accessioning donations | <input type="checkbox"/> Grant-writing committee |
| <input type="checkbox"/> Computer skills, Data entry for archives | <input type="checkbox"/> Liaison with business community |
| <input type="checkbox"/> Arrange/maintain museum displays | <input type="checkbox"/> Photography (archives/events) |

Indicate Annual Supporting Membership Category

_____ New member	_____ Renew membership	<u>Amount Enclosed</u>
_____ Individual	\$ 20.00	\$ _____
_____ Family.....	\$ 30.00	\$ _____
_____ Senior age 60+	\$ 10.00	\$ _____
_____ Student (under 19)	\$ 10.00	\$ _____
_____ Additional Donation (<i>optional</i>)		\$ _____

Please make your check/money order payable to: Lehigh Township Historical Society
Mail this form along with payment to: 3811 Lehigh Dr. Northampton, PA 18067-9612

For Office Use only: Date Rcvd _____ Cash _____ Check No. _____ Amount \$ _____
Rev. 1/2026 Rcvd by: _____