



# Oakmont Historical Society

P.O. Box 2  
Oakmont, PA 15139

## MEMBERSHIP APPLICATION

**Please Print:**

**DEADLINE: DECEMBER 31<sup>st</sup>**

Date of Application: \_\_\_\_\_

Type of Application:                      New: \_\_\_\_\_                      Renewal: \_\_\_\_\_ [Check one]

Membership Classification:	_____	Family	\$ 25.00
	_____	Individual	\$ 15.00
	_____	Business	\$ 25.00
	_____	Lifetime	\$300.00
	_____	Donation	\$ _____

\* \* \* \* \*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/ State / Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email address: \_\_\_\_\_

Areas of Interest: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Submit this form, with the appropriate fee, to the address shown above. Thank you for your interest and continued support.

[www.oakmonthistoricalsociety.org](http://www.oakmonthistoricalsociety.org)

*~ To research, preserve and share the history of the community for future generations ~*