

**2019 Membership
(January 1 – December 31)**



**Lakeside Heritage Society
324 W. 3rd Street, Lakeside, Ohio 43440**

Name _____

Address _____

Lakeside Address _____

Email _____

Home Phone _____

Cell Phone _____

_____ **Please send my newsletter by US mail**

I/We have enclosed dues as follows:

_____ \$25 Single; _____ \$40 Family

_____ \$75 Contributing

_____ \$150 Patron

In addition to the above dues payment, I /We would like to make the following tax-deductible donation(s):

\$ _____ General Fund (pays operating expenses)

\$ _____ Endowment Fund (guarantees our future)

\$ _____ Building Fund (plans for expanding space)