



# St. Michael Historical Society

*Collecting, Preserving and Sharing the History of St. Michael*  
MEMBERSHIP APPLICATION / RENEWAL FORM

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (optional), Home: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Cell: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

I prefer to receive my newsletter by Email (optional)

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

New Member \_\_\_\_\_ Renewal \_\_\_\_\_ (Check one)

\$ \_\_\_\_\_ I have also enclosed an additional tax deductible contribution of \$ \_\_\_\_\_  
for the SMHS General Operating Endowment Fund.

*Please make checks payable to:* St. Michael Historical Society  
11800 Town Center Drive  
St. Michael, MN 55376

<b>For Office Use Only:</b> Date on check: ____ / ____ / ____ Check number (if applicable) ____ Membership Chair initials: _____
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*Contributions to the St. Michael Historical Society are tax deductible  
In accordance with IRS tax codes.*

**Visit us at:** [www.saintmichaelhistory.org](http://www.saintmichaelhistory.org)

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