



Howard-Suamico Historical Society

Patron/Partner of the Howard-Suamico Historical Society:

Our goals are set. We need your help to meet our goals by becoming a partner in our plans for the future of HSHS.

NAME OF COMPANY/ORGANIZATION: _____

ADDRESS: _____

CITY: _____ ZIP: _____ PHONE # _____

EMAIL: _____

CONTACT PERSON: _____

TYPE OF COMPANY/ORGANIZATION: _____

OWNER OR MANAGER: _____

Please designate someone within your company/organization to represent you as a contact person: _____

Patron/Partners Annual Membership Dues: \$100.00 _____

Membership includes:

- Listing in our newsletters
- Listing at each HS Memories Show
- Listing on our website www.hshistoricalociety.org
- Newsletters
- Meeting agendas
- Meeting minutes
- Merchandise discounts

Return with payment to:

Howard-Suamico Historical Society
c/o Membership Chairman
605 Maywood Avenue
Green Bay, WI 54303

For Office Use Only:

Membership Date: _____ Date Paid _____ Amount Paid _____