



*Duarte Historical Society,
Museum and
Friends of the Library*

POST OFFICE BOX 263 • DUARTE, CA 91009-0263 • (626) 357-9419

Date: _____

I would like to help preserve the rich history of Duarte by becoming a member of the Duarte Historical Society, Museum, and Friends of the Library. Enclosed is a check for the amount indicated by my type of annual membership:

- | | | |
|--------------------------|--------------------------|-------|
| <input type="checkbox"/> | Student/Senior/Teacher | \$ 10 |
| <input type="checkbox"/> | Individual | \$ 15 |
| <input type="checkbox"/> | Family | \$ 25 |
| <input type="checkbox"/> | Business or Organization | \$100 |
| <input type="checkbox"/> | Life (one time payment) | \$500 |

Name: _____

Address: _____

Telephone: _____