

Colonial Maine Living History Association

APPLICATION FOR MEMBERSHIP

Name: _____

Address: _____

City, State & Zip: _____

Telephone: _____ e-mail: _____

Are you at least 16 years of age? Yes / No Date of Birth (if minor): _____

Parent or Guardian Name (minor applicant): _____

What colonial time periods are you interested in? _____

What sort of events are you interested in? _____

Please list any existing Medical Conditions or Concerns: _____

Have you ever been convicted of a felony? Yes / No

Are you required to register as a sex offender? Yes / No

Is your right to own or possess a fire arm restricted in any way? Yes / No

I hereby apply for membership in Colonial Maine Living History Association. I have enclosed a check to cover my annual dues. 2021 dues are \$20 per person. Checks should be made out to: Colonial Maine Living History Association

Signature: _____ Date: _____

Mail this form and payment to:

Judy Wasson
7 Knox Ridge Road
Thomaston, ME 04861

We do not discriminate based on gender, race or religion