

2009 MEMBERSHIP/RENEWAL APPLICATION
for the Rappahannock Colonial Heritage Society, Inc.

Yearly dues are \$10.00 for individuals and \$15.00 for families living in the same household. If you joined RCHS on or after September 1, 2008, you do not need to pay the 2009 dues.

Please complete and sign, then enclose a check payable to **Rappahannock Colonial Heritage Society, Inc.**, in the proper amount and mail to P.O. Box 7823, Fredericksburg, VA 22404-7823.

Name: _____

Address: _____

City, State, ZIP: _____

Home Telephone: _____

Other Telephone: _____

E-mail Address: _____

Your Special Interests:

- | | | | |
|--|---|---|---------------------------------|
| <input type="checkbox"/> School (SOL) Programs | <input type="checkbox"/> Colonial Dancing | <input type="checkbox"/> Living History | <input type="checkbox"/> Sewing |
| <input type="checkbox"/> Educational Programs | <input type="checkbox"/> Research | <input type="checkbox"/> Newsletter | <input type="checkbox"/> _____ |

Membership:

New Membership or Renewal

Individual (\$10) or Family (\$15)*

I hereby grant The Rappahannock Colonial Heritage Society, Inc., ("RCHS") the right to use my picture, voice, name, and video footage of me on the RCHS Web site, newsletter and promotional materials. I hereby release RCHS from all liability resulting from these uses.

Member's Signature: _____

*Family Memberships: Please continue filling out form on the other side. If you need more space, use a sheet of paper.

For Family Memberships:

Name: _____

Your Special Interests:

- School (SOL) Programs Colonial Dancing Living History Sewing
- Educational Programs Research Newsletter _____

Name: _____

Your Special Interests:

- School (SOL) Programs Colonial Dancing Living History Sewing
- Educational Programs Research Newsletter _____

Name: _____

Your Special Interests:

- School (SOL) Programs Colonial Dancing Living History Sewing
- Educational Programs Research Newsletter _____

Name: _____

Your Special Interests:

- School (SOL) Programs Colonial Dancing Living History Sewing
- Educational Programs Research Newsletter _____

Name: _____

Your Special Interests:

- School (SOL) Programs Colonial Dancing Living History Sewing
- Educational Programs Research Newsletter _____

I/We hereby grant The Rappahannock Colonial Heritage Society, Inc., ("RCHS") the right to use my/our picture, voice, name(s), and video footage of me/us on the RCHS Web site, newsletter and promotional materials. I/We hereby release RCHS from all liability resulting from these uses.

Member's Signature: _____

Member's Signature: _____

Member's Signature: _____

Member's Signature: _____

Member's Signature: _____

Family Membership with Children under the age of 18:

In addition, I (parent or legal guardian) hereby grant RCHS the right to use pictures, voices, name(s), and video footage of my child/children on the RCHS Web site, newsletter and promotional materials. I hereby release RCHS from all liability resulting from these uses.

Parent's Signature: _____

Names of Children under 18: _____