

JOIN THE APOLLO AREA HISTORICAL SOCIETY

Please complete the form below and return to the AAHS.

Date _____

Indicate which level of dues you are paying;

___ Annual Adult Membership \$15.00

___ Annual Student Membership \$5.00

___ Family Membership \$30.00

___ Individual Life Membership \$125.00

___ Business/Corporation Life Membership \$300.00 One Time Donation \$ _____

Name _____ Phone Number _____

Address _____

Email Address _____

Please make check payable to AAHS

Mail to PO Box 434, Apollo, PA 15613

2026

Please renew your dues by December 31 of each year. Thank you for your participation and support of the AAHS!