

Laytonsville Historical Center Membership Application

YES! I want to support the programs and historical efforts of the Laytonsville Historical Center.

Name _____

Address _____

Phone: Day _____ Evening _____

Please make your check payable to the **Laytonsville Historical Center, Inc.** (a 501 C 3 non-profit organization).

Donations are tax deductible to the extent permitted by law.

Enclosed is my/our annual membership or contribution of

\$ _____

Please let us know – is this a

_____ New Membership or a

_____ Renewal

Laytonsville Historical Center, Inc.

P.O. Box 5158

Laytonsville, MD 20882