



Portsmouth Historical Society Membership Form

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Membership level:

Individual \$15.00

Corporate \$75.00

Family \$25.00

Patron \$100.00

Contributing \$50.00

Please mail this form with your check to:
Portsmouth Historical Society
P.O. Box 834
Portsmouth, RI 02871



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