

The Italian American Historical Society of Connecticut

Application for New and Renewal Memberships

(Membership Year-January 1 to December 31)

Name: _____

Address: _____

City: _____

State: _____ Zip _____

Telephone: _____ Cell: _____

E-Mail: _____

Dues: *(all dues and donations are tax deductible)*

_____ Individual \$15

_____ Family \$25

_____ Student \$5

Donation – SCSU Scholarship Endowment \$ _____

Memorialized Donation \$ _____

Name: _____

Total Check Amount \$ _____

Please Indicate Special Interests:

- Maintaining Archives
- Interviewing People
- Conducting Tours
- Newsletter
- Workshops
- Speaker Lectures
- Trips
- Exhibitions
- Educational Programs

Please Make Checks Payable To: IAHS of CT by March 31

Mail Renewal Form and Check to:

**Rose Mentone
541 Hill Street
Hamden, CT 06514**