Burtner House Restoration Society 2024 Membership Application

Membership is for a: Renewal	New Member (Gift Membership	
Please print all information clearly belo)w:		
Adult member 1 Name: (First)		(Last)	
Adult member 2 Name: (First)		(Last)	
Street/Mailing address:			
City:		State:	Zip code:
Phone: ()	Email:		
If the above is a gift membership, please of	complete the givers in	formation below:	
Are you also paying for your own membe	rship? YES	NO	
Name: (First)	(L	Last)	
Street/Mailing address:			
City:		State:	Zip code:
Phone: ()	Email:		
Payment: Cash Check made	e payable to: Burtner	House Restoration	n, Inc.
Mail to: Burtner House Restoration Soc	ciety, Inc., PO Box 2	92, Natrona Heiş	ghts, PA 15065
Membership – Single \$10, Couple \$15	\$		
Gift Membership	\$		
Additional Donation to BHRS	\$		
Total	\$		
☐ I would like more information on way	s to be a volunteer.		
☐ I would like to be on the Bakers List f	or Bake Sales at our I	Festivals.	
Please email any newsletters and/or pe	ertinent information.		
I would consider being a member of the	ne Board.		
This donation is tax-a	leductible to the	fullest extent	of the law.
Please keep this por Your contribution/membership ma	ortion as a receipt for kes it possible to con	•	
Tax-deductible donation Total \$	Da	nte:	_
Burtner House Restoration Society, Inc. E	EIN: 23-7090786		

Questions or comments - contact us at 724-224-9662 or email: BHRS1821@gmail.com

Thank you for your participation and support of the BHRS!