



APPLICATION FOR MEMBERSHIP

I am proud to support the projects and programs of the Southern Appalachian Historical Association. Please accept my membership.

NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

Payment Method: Check Enclosed SAHA Website via PayPal

Membership Amount: _____

Membership Levels:

\$25

\$50

\$100

\$200

\$500

View all the benefits on our website!

All membership levels include your name listed in the Horn in the West Souvenir program. Contributions are tax-deductible as SAHA is a 501c(3) organization.

Please make checks payable to SAHA or Southern Appalachian Historical Association and mail to:

P.O. Box 295
Boone, NC 28607.