

To Join FNCHS — Print, Complete, and Mail this Form

FEDERATION OF NORTH CAROLINA HISTORICAL SOCIETIES
Membership Application Form

Our organization would like to be part of FNCHS . . .

Name of Organization:	
Contact Person:	
Phone Number:	
E-mail Address:	
Mailing Address:	
City:	
Zip Code:	

Check one of the following options . . .

- Enclosed is a check for our \$25.00 membership fee.
 Please bill us for our \$25.00 membership fee.

Mail to:

FNCHS
4610 Mail Service Center
Raleigh, NC 27699-4610