



319-656-3232  
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# Membership Form

**Complete this form and return it to:**

Kalona Historical Society  
715 D Avenue Kalona, IA 52247  
PO Box 292 Kalona, IA 52247 \*Mailing address

Please provide the following information:

**Membership Level selected:**

\_\_\_\_\_ **Individual** - \$35.00 per year (4 free passes)

\_\_\_\_\_ **Senior Citizen / Student** - \$25.00 per year (3 free passes)

\_\_\_\_\_ **Family** - \$50.00 per year (6 free passes)

Please let us know how you would like to receive your Quarterly Newsletter:

\_\_\_\_\_ Mail

\_\_\_\_\_ E-mail

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_

**\*Make check payable to Kalona Historical Society.**

