



Historic Marbold Farmstead Association

PO Box 438, 21722 State Highway 29
Greenview, IL 62642

Thank you for your membership and support of the Historic Marbold Farmstead Association.

Please complete the following Membership Form and return with your payment.

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email address _____

Name on membership card and donor lists will be as indicated above unless otherwise specified below:

Please do not list my name publicly as a donor.

Membership Levels: Individual - \$25.00

Household - \$35.00

(Membership year is from January 1 – December 31.)

Additional Gift: \$ _____

Total payment enclosed: \$ _____

I would like to receive the HMFA Quarterly by: email US mail

Please make checks payable to HMFA and send to HMFA, PO Box 438, Greenview, IL 62642