



JEWISH HISTORICAL SOCIETY OF SOUTH CAROLINA
2010 MEMBERSHIP APPLICATION

Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: () _____

Fax: () _____

*****E-Mail Address:**

*****Your e-mail Address is requested** so that we may keep you informed of happenings around the state. It will not be given out or seen on the e-mails. Your privacy will be protected.

You may now purchase or renew your JHSSC membership online.
Go to www.jhssc.org and
Click on **"Membership"** to go to Member Lookup.
Find your record using your telephone number.

ANNUAL DUES FOR THE SOCIETY

(MEMBERSHIP RUNS ON A CALENDAR YEAR, FROM JANUARY-DECEMBER)

- | | | | |
|---|-------|--|-----------------------------------|
| <input type="checkbox"/> Individual/Family Membership | \$36 | <input type="checkbox"/> Founding Patron | \$1000 |
| <input type="checkbox"/> Friend | \$200 | <input type="checkbox"/> Pillar | \$5000
(\$1000 for five years) |
| <input type="checkbox"/> Sponsor | \$350 | <input type="checkbox"/> Other | \$ _____ |
| <input type="checkbox"/> Patron | \$750 | | |

*Please make checks payable to **JHSSC** and mail to
JHSSC c/o Jewish Studies Program
96 Wentworth Street
Charleston, SC 29424*

Phone 843.953.5682 Fax 843.953.7624