



**Oakmont Historical Society**

P.O. Box 2  
Oakmont, PA 15139

***Membership Application***

***Please Print:***

**Date of Application:** \_\_\_\_\_

**Type of Application:**            **New:** \_\_\_\_                      **Renewal:** \_\_\_\_ *[Check one]*

**Membership Classification:**

_____	<b>Individual</b>	<b>\$15.00</b>
_____	<b>Senior</b>	<b>\$10.00</b>
_____	<b>Family</b>	<b>\$25.00</b>
_____	<b>Lifetime</b>	<b>\$300.00</b>
_____	<b>Donation</b>	

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

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

**City/ State / Zip:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_                      **Cell:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Areas of Interest:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Return this form to:**  
**Oakmont Historical Society**  
**P.O. Box 2**  
**Oakmont, PA 15139**