

Clay County Museum & Historical Society - 2024 Membership Application

Name: _____	Membership Levels/ Dues (Select one):
Email: _____	___ Bronze (individual) \$20
Mailing Address _____ _____	___ Silver (family) \$30
	___ Any Amount Donated Above the Membership dues is Tax Deductible 501(c)(3)
City:_____ State:_____ Zip:_____	
Phone: (_____)_____ Cell/Txt # => Y / N	Membership is January thru December

Please provide an email address to receive the newsletters and updates on events.

Please make all checks payable to: Clay County Museum & Historical Society.

Mail completed application with dues payment to:

CCMHS
14 North Main Street
Liberty, MO 64068

Or drop in the **mail slot** at the Museum when you stop by for a visit

Thank you for your Support!