



## Individual Membership Application Form

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

Honorific (Optional): \_\_\_\_\_

Title: \_\_\_\_\_

Institution: \_\_\_\_\_

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

City, State & Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

Please add my email to the NCPC-News email list.

### Membership Rates

\$25 Individual Member

\$10 Student Member (attach a copy of your student I.D.)

I wish to make a tax deductible donation to the NCPC endowment fund.

Donation Amount \$ \_\_\_\_\_

**Total Payment (Registration + Donation) \$ \_\_\_\_\_**

Please make check payable to the North Carolina Preservation Consortium. Print and complete this form (one per person) and mail with payment to:

NCPC  
P.O. Box 2651  
Durham, NC 27715-2651