MEMBERSHIP APPLICATION

Active Member ................................................................................................................................................. $12.00

I am enclosing the fee of $_________ to cover the application for membership in the Rosa A. Lott Historical Preservation Society for the period ending December 31, 20_____.

NAME: _____________________________________________________________________________

ADDRESS: ____________________________________________________________________________

____________________________________________________________________________________

PHONE (1): _______________________________ PHONE (2): ______________________________

PHONE (3): _______________________________ FAX: ____________________________________

E-MAIL: ____________________________________________________________________________

Please make your check or money order payable to Rosa A. Lott Historical Preservation Society and mail it along with your application to:

Rosa A. Lott Historic Preservation Society
P.O. Box 546
Citronelle, AL 36522

P.O. Box 546 * Citronelle, AL 36522 * www.rosaalott.org * info@rosaalott.org