



Membership Application

* Required

First Name * _____ Last Name * _____

Address *

Street Address _____

Street Address Line 2: _____

City _____ State _____

Zip Code _____

Phone Number * _____

E-mail * _____

Second Household Member (if applicable)

First Name _____ Last Name _____

Phone Number _____

E-mail _____

Please check one: *

New Membership Renewal

Choose a membership level: *

Individual Membership - \$20 / year

Household Membership (Two Voting Members) - \$25 / year

Student Membership (with ID) - \$10 / year

Membership + Donation - \$50 / year

Please make checks payable to Des Moines Historical Society (DMHS)

Mail application and payment to:

P.O. Box 8038

Des Moines, IA 50301