



Riders Mills Historical Association

Mission: To preserve and maintain the Riders Mills Schoolhouse and provide education to our community.

Member Information (please print or type)

Name(s)* _____

Address* _____

City, ST, Zip Code* _____

Phone 1 H: _____

Email(s)* _____

Send me updates on events: () Yes () No

Membership Level

Your membership dues will be used for the upkeep of the schoolhouse, and the programs we provide during the year. If possible we will contribute any remaining dues to our scholarship program.

I (we) choose the following Member Level:

() Individual.....\$20.00

() Family.....\$30.00

() Supporter.....\$50.00

() Business.....\$75.00

() Patron.....\$100.00

We are a 501c3 not-for-profit corporation. Therefore, your membership support is tax deductible.

Gift will be matched by (company/family/foundation) _____

form enclosed form will be forwarded

Acknowledgement Information

Please use the following name(s) in all acknowledgements: _____

I (we) wish to have our gift remain anonymous.

Please make checks payable to:

**Riders Mills Historical Association
P.O. Box 1
Malden Bridge, NY 12115
Attn: President**