## Colonial Maine Living History Association

## APPLICATION FOR MEMBERSHIP

Name:	
Address:	
City, State & Zip:	
Telephone:	e-mail:
Are you at least 18 years of age? Yes / No Parent or Guardian Name (if minor applicant): Parent or guardian required for minors, and must least to the second second second second second second second second second sec	Date of Birth (if minor): be with them at all events.
What colonial time periods are you interested in?	
What type of events and activities are you interest	ed in?
Have you ever been convicted of a felony? Yes / N Are you required to register as a sex offender? Yes Is your right to own or possess a fire arm restricted	s / No
	Living History Association. I have enclosed a check erson over the age of 18, and \$0 per person under 18. ving History Association
Signature:	Date:
Mail this form and payment to: Colonial Maine Living History Assn PO Box 179, Clinton ME 04927	

We do not discriminate based on gender, race or religion.