

**ANNUAL ORGANIZATIONAL MEMBERSHIP FORM**

Date: \_\_\_\_\_

Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_  
*Mr, Mrs, Ms    First Name    Middle Name/Initial    Last Name    Suffix*

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

Address: \_\_\_\_\_  
*Street Address or Box #                      City                      State                      Zipcode*

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

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

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**Select Membership Level:** Lucretia Thomas Kennard (\$125)\_\_\_; Mary Ann Shadd Cary (\$250)\_\_\_; Crystal Bird Fauset (\$500)\_\_\_; Henry Highland Garnet (\$1000)\_\_\_; Harriet Ross Tubman (\$2500)\_\_\_; or, Frederick Douglass (\$5000)\_\_\_.

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***Please mail or deliver this form with your check  
to Sumner Hall, 206 S. Queen Street, Chestertown, MD 21620.***