

CAMP BLOUNT HISTORIC SITE ASSOCIATION
MEMBERSHIP APPLICATION

Name _____

Organization Name if Applicable _____

Mailing address _____
(Street or P. O. Box)

City _____ State _____ Zip _____
Telephone (H) _____ (W) _____ (FAX) _____

E-mail _____

Membership type _____ \$10.00 Individual per year _____ \$20.00 Family per year _____ \$100.00 Lifetime

Would you be willing to serve on a committee? _____ yes _____ no

Did you have ancestors who mustered at Camp Blount? _____ yes _____ no

If so, please give family relationship, soldier's name, regiment, etc.

Do you have photographs, letters or other artifacts regarding Camp Blount? _____ yes _____ no

If yes, please list items

Can you provide copies for the association's reference library? _____ yes _____ no

Comments: (please use backside of sheet if necessary)

Please make check payable to CBHSA and mail to:

Camp Blount Historic Site Association
P. O. Box 1422
Fayetteville, TN 37334

CAMP BLOUNT HISTORIC SITE ASSOCIATION IS A NON-PROFIT, TAX-EXEMPT, WITH 501(C)(3) IRS STATUS.
YOUR CONTRIBUTIONS ARE TAX-DEDUCTIBLE IN THE EXTENT PROVIDED BY LAW.