



Membership Form

First Name _____

Last Name _____

Address _____

City _____

State _____ Zip Code _____

Email Address _____

Organization: please check one.

- | | |
|---|---|
| <input type="checkbox"/> Men of Menendez | <input type="checkbox"/> Searle's Buccaneers |
| <input type="checkbox"/> St. Augustine Garrison | <input type="checkbox"/> East Florida Rangers |
| <input type="checkbox"/> Red Children of the Forest | |

TYPE OF MEMBERSHIP: please check one.

- | | |
|--|---|
| <input type="checkbox"/> Individual (\$25.00) | <input type="checkbox"/> Family (\$35.00) |
| <input type="checkbox"/> Associate- non voting (\$10.00) | |

Mailing address: Historic Florida Militia
PO Box 586
99 King St.
St. Augustine, FL 32084

