

Fort Totten State Historic Site Foundation Membership Form

Name _____

Address _____

Email _____

Phone _____

Membership categories:

_____ \$30 Individual.

_____ \$50 Family.

_____ \$110 Sponsor.

_____ \$260 Corporate.

Mail your membership fee and this form to:

FTSHS Foundation
PO Box 554
Devils Lake, ND 58301