



HISTORIC MOUNT PLEASANT

www.historicmountpleasant.org

Membership Enrollment Form

Mail to: HMP, 3213 Mount Pleasant St NW, 2nd Fl, Washington, DC 20010
or on-line at: www.historicmountpleasant.org/membership/

Date: _____

Renewal of a past membership

New member enrollment

Membership type:

ANNUAL

LIFE \$500

Household \$50 (suggested)

Individual \$35 (suggested)

Additional \$ _____

Make checks payable to Historic Mount Pleasant, Inc. or PayPal to info@historicmountpleasant.org
Contributions are tax deductible.

Annual membership expires November 30.*

*Memberships received after September 1st will extend to November 30th of the following year.

Print Clearly Please

Name(s) _____

& Street _____ NW Apt # _____

Washington

DC

20010-

/ 20009-

City _____ State _____ Zip+4 _____

E-mails: _____

Home Phone: 202- _____

Mobile: 1 _____

Mobile: 2 _____

Work: 1 _____

Work: 2 _____

I am/We are interested in volunteering with the following HMP activities:

Community Outreach

Neighborhood History

Holiday Party

Restoration Workshops

House/Garden Tour

Website / Social Media

Neighborhood Beautification

Other _____

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