



**Northern Indiana Historical Power Association
Membership Application/Renewal
2016**

Please circle one: **NEW** **MEMBER** **RENEWAL**

**** Paid Lifetime members – please fill out and return so we can verify your information and keep you on the mailing list*****

Date: _____

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

***E-Mail:** _____

Spouse's Name: _____

Children's Names / ages (18 years and under): _____

Type of Membership:

Annual | \$12.00 Dues

Lifetime | \$150.00 minus verifiable age

Senior (70 yrs. or older) Free

Mail complete application and check to:

**NIHPA Membership
PO Box 2803
Chesterton, IN 46304**

Website: www.nihpa.org

Email: membership@nihpa.org