



**Adirondack Architectural Heritage (AARCH)
Gift of Membership**

Please send your gift registration and check to:
**Adirondack Architectural Heritage
1745 Main Street
Keeseville, NY 12944**

This gift of membership to Adirondack Architectural Heritage (AARCH) is given to:

Name: _____

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Address 2: _____

City: _____ State: _____ Zip: _____

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This gift is from:

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Please Specify gift:

Individual \$35

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Supporting \$50

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My company has a matching gift program.
I will send a form to AARCH