

Friends of the Smith-Harris House
PO Box 6
Niantic, CT 06357

Attn: Membership Chair

Name _____

Address _____

Town/City, State, Zip Code _____

Telephone _____

Email Address _____

Membership Level

\$10.00 *Individual* _____

\$15.00 *Family* _____

\$25.00 *Non-profit/Business* _____

We're always looking for volunteers. Please let us know if you'd like to help!