

2025 Membership Form

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A Non-Profit Organization



Name:		Telephone:
Street or PO Box:		Email:
City:	_State:	Zip:
Type of Membership (Please check appropriate box) Bronze \$40.00		
Please make checks payable to: Goshen Historic Track, Inc. , and kindly mail to: 44 Park Place, Goshen, NY 10924		