



First New Hampshire Regiment

2026 Membership Renewal Application

Primary Contact

Full Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Membership Level

Make checks payable to: *First New Hampshire Regiment*

____ Individual with one vote (**\$30.00**)

Voter's name (If not primary contact): _____

____ Family with one adult voting member (**\$50.00**)

Voter's name (If not primary contact): _____

____ Family with two adult voting members (**\$60.00**)

Name of 1st voting member: _____

Name of 2nd voting member: _____

Additional family members participating in 1NH events

Name: _____ Relationship: _____ Cell Phone: (____) _____

Name: _____ Relationship: _____ Cell Phone: (____) _____

Name: _____ Relationship: _____ Cell Phone: (____) _____

Emergency Contact

Name: _____ Relationship: _____ Phone: (____) _____

Include my contact information in the Member Directory

(Check one) Yes _____ No _____

Preferred method of receiving event information

(Check one) Email _____ Phone _____ U.S. Mail _____

Primary email address for updates: _____

Secondary email address for updates: _____

Send forms and dues to: **Treasurer, 10 Oak Ridge Ave, Merrimack NH 03054**

Dues are to be paid by May 1 of each year in to cover the member for that year.

FOR OFFICE USE:

Membership Status: ____Regular Member(s) ____Lifetime Member(s) ____Other: _____

Dues Payment Method: Check #: _____ Cash: _____ Accepted by: _____

Date: _____

