

# Times-Journal Subscription Form

PO Box 339 • Cobleskill, NY 12043

**SUBSCRIPTION TO:**

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone # \_\_\_\_\_

**GIFT GIVER:**

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone # \_\_\_\_\_

Please Circle One

	In County	Out of County
1 Year	\$50.00	\$66.00
2 Years	\$92.00	\$120.00
6 Months	\$35.00	\$44.00

**Bill Me**

**MasterCard**

Card # \_\_\_\_\_

**Visa**

**Check**

Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_