| Membe | rship Fo | rm: | |
|---|-----------------------------------|---|----------------------|
| New Membe | er 🗌 Renewi | ng 🔲 | |
| Address | | | |
| City/State/Z | Zip | | |
| Phone | | | |
| Email | | | |
| Adult Name | s (Must reside ii | n same household | <i>l)</i> |
| NAME | | | DOB |
| NAME | | | DOB |
| Children's N | ames (Under 1 | 8) | |
| NAME | DOB | NAME | DOB |
| NAME | DOB | NAME | DOB |
| Membe | rship Le | vels | |
| ☐ Individual (\$60)☐ Household (\$100)☐ Associate (\$150) | | ☐ Sustaining (\$250) ☐ Principal (\$500) | |
| Additional C | Gift \$ | | |
| 20% Discour | nt (<i>Individual an</i> | nd Household levels | only, if applicable) |
| ☐ Military | Military Discount Senior Discount | | iscount |
| ☐ Local Hi | storical Society | Member Disco | unt |
| Total Amou | nt Due \$ | | |
| Paymei | nt Option | ıs | |
| Check # | | Credit Card | |
| NUMBER | | | |
| EXP DATE | | | CCV |
| | | | |

Please return this form to:

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