

# MUSEUM MEMBERSHIP APPLICATION

## The History Museum

## Campus (BOTH Museums)

- |  |  |
|--|--|
| <input type="checkbox"/> Founder (\$500)*    | <input type="checkbox"/> Platinum (\$800)*   |
| <input type="checkbox"/> Explorer (\$250)*   | <input type="checkbox"/> Gold (\$400)*       |
| <input type="checkbox"/> Pioneer (\$125)*    | <input type="checkbox"/> Silver (\$200)*     |
| <input type="checkbox"/> Family (\$60)*      | <input type="checkbox"/> Family (\$90)*      |
| <input type="checkbox"/> Dual (\$50)*        | <input type="checkbox"/> Dual (\$75)*        |
| <input type="checkbox"/> Senior Dual (\$45)* | <input type="checkbox"/> Senior Dual (\$65)* |
| <input type="checkbox"/> Individual (\$40)   | <input type="checkbox"/> Individual (\$60)   |
| <input type="checkbox"/> Senior (\$30)       | <input type="checkbox"/> Senior (\$45)       |

Membership fee: \$ \_\_\_\_\_

Contribution: \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

Check # \_\_\_\_\_ Date \_\_\_\_\_ Account# \_\_\_\_\_

Credit Card: MC, VISA, AMEX, DISC *(Circle one)* Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_

Please make checks payable to The History Museum. \_\_\_\_\_ Signature \_\_\_\_\_

Primary Member: \_\_\_\_\_

Additional Member: \_\_\_\_\_

(\*please provide a second individual for these memberships)

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Email \_\_\_\_\_

Check here to renew your membership

annually with credit card information provided.

Website \_\_\_\_\_