



Membership Application

Name _____ Date _____
Business _____
Address _____
City _____ State _____ Zip _____
Email* _____ Phone _____

• All communication from the Historical Trust will be sent via e-mail when possible.

Payment: Cash/Check or Credit Card

Credit Card Information: Card # _____ Exp: __/__(mo./yr.)

Security Code(3 digit) (4 digit for AMEX) _____

Billing address if different from above _____

Please tell us about your interests at the Trust(please circle all that apply)

Gala Volunteering Tours Hassel Island Museum
Lectures Step Streets Membership Fundraising Furniture
Fort Christian Conservation License Plates Restoration
Publicity Other _____

Additional
Comments: _____

- Student \$10
- Individual \$30
- Family \$75
- Business \$250+
- Contributor \$125
- Benefactor \$250-\$4999
- Life \$5000 (Can be paid over 5 years)