

## Membership Form

*Please print, complete, and return this form with your contribution to the Sault Ste. Marie Museum.*

*Please fill out one ( 1 ) form per member.*

**New Member**       **Renewing Member**       **Gift Membership**

Date: \_\_\_\_\_

First Name: \_\_\_\_\_ Family Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail: \_\_\_\_\_ Initial: \_\_\_\_\_

*By providing my email and initialing this form, I give permission to the Sault Ste. Marie Museum to send me email correspondences regarding upcoming events, activities, and other information necessary for me to utilize my membership.*

## Membership Levels & Donation Levels

*Please check all necessary boxes*

<input type="checkbox"/>	\$15 - Senior / Student	<input type="checkbox"/>	\$10 to \$99 - Supporter
<input type="checkbox"/>	\$15 - Military Service / Veteran	<input type="checkbox"/>	\$100 to \$199 - Associate
<input type="checkbox"/>	\$25 - Individual	<input type="checkbox"/>	\$200 to \$499 - Patron
<input type="checkbox"/>	\$40 - Dual	<input type="checkbox"/>	\$500 or more - Benefactor
<input type="checkbox"/>	\$45 - Family	<input type="checkbox"/>	<i>*Tax receipts will be issued for donations over \$10</i>
<input type="checkbox"/>	\$35 - Grandparent	<input type="checkbox"/>	

Amount Enclosed for Membership: \_\_\_\_\_

Amount Enclosed for Donation: \_\_\_\_\_

Total Enclosed: \_\_\_\_\_

STAFF USE ONLY	
Amount Paid:	
Date:	Staff Initial: