

ORCAS ISLAND HISTORICAL MUSEUM

Membership Form

The Orcas Island Historical Museum seeks to educate, inspire, entertain and involve our community and visitors in the stewardship of our unique island history. The Historical Museum is a non-profit organization formed under the laws of the State of Washington, and is recognized by the Internal Revenue Service as having 501(c)(3) status. Memberships are renewable each December 1st.

Renew your membership (see your renewal year on the mailing label), or Join us today as a new member! *Thank you for your support.*

Membership benefits include:

- Information-filled newsletters and access to specialized museum training.
- Free Museum and Crow Valley School admission and research access.
- Free reciprocal admission to the Lopez and San Juan Historical Museums
- Mailed announcements of all OIHM-sponsored events and special openings
- Invitation to the annual meeting & holiday party in December
- 10 percent discount in the museum store
- Invitation to attend monthly OIHM board meetings

Please check your membership choice:



Benefactor:	\$ 500.00		Supporter:	\$ 50.00	
Business Sponsor:	\$ 250.00		Family or Individual	\$ 25.00	
Sponsor:	\$ 100.00		Senior, Student	\$ 15.00	

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Please send completed form and payment to:

Orcas Island Historical Museum

P.O. Box 134

Eastsound, WA 98245

Please send my quarterly newsletter via email. _____

Check Enclosed: # _____ Today's Date _____

Please charge my credit card: (circle one) VISA/MC only, we cannot process AmEx and others.

Card Number _____ Exp. Date _____

Name on card _____ 3-digit code on back _____

Authorized signature _____ Date: _____

IN ADDITION to my annual membership dues, I also want to contribute a tax-deductible donation of:

Other \$ _____ **\$1,000** **\$500** **\$250** **\$100** **\$50** **\$25**

I would like to designate my donation for the Exhibits & Renovation Project _____. (Donor recognition benefits start at \$1,000)

I would like to designate my donation for best use _____; **or in memory of** _____.

My employer will match my gift (Co. name, % match) _____.

Donors of additional gifts will receive a tax-exempt contribution acknowledgement.

Mydocs: membership: membership form 2009

Revised 2009