

MEMBERSHIP APPLICATION

I'm applying for a **new membership**

I'm **renewing my membership**

Name _____ e-mail _____

Address _____

City/Town _____ Phone _____

Province _____ Postal Code _____

MEMBERSHIP CATEGORIES

- Family \$50.00
- Senior \$25.00
- Individual \$35.00

Number of membership cards _____

AMOUNT

\$ _____ Membership fee

\$ _____ Donation

(Optional. We invite your donations for ongoing support of the *friends of the museum*. A tax-deductible receipt is issued for donations in excess of the membership fee.)

\$ _____ TOTAL Amount

PAYMENT METHOD

Cheque enclosed VISA MasterCard Other _____

Credit Card # _____

Expiry Date _____ CVV # _____

Sign me up for the Royal Saskatchewan Museum information and updates.

Signature _____ Date _____

Membership is valid for one year from the date of registration. Please make cheques payable to the **Friends of the Royal Saskatchewan Museum, Inc.**