

membership form

CONTACT INFORMATION Name (including spouse) Address City_____ State____ Zip____ Phone (Circle: Cell Home) _____ Email____ MEMBERSHIP LEVEL ☐ **Explorer** | \$40 The following amounts of each membership level are tax deductible: ☐ **Partner** | \$120 Explorer: \$40 Partner: \$120 ☐ Ambassador | \$240 Ambassador Do you wish to receive Thank-You gift: with Thank You gift: \$201 ☐ Yes □ No without Thank You gift: \$226 ☐ Director's Circle | \$1000 Director's Circle Do you wish to receive Thank-You gift: with Thank-You gift: \$921 ☐ Yes ☐ No without Thank you gift: \$946 Organization/Non-Profit: \$80 ☐ Organization/Non-Profit | \$150 **PAYMENT METHOD** ☐ Cash ☐ Check ☐ MasterCard ☐ Visa ☐ DISC ☐ AMEX Amount Card No.______Exp. Date___/___ V-Code_____ Signature_____ Date_____

☐ Join/Renew using the Automatic Monthly Payment Option

Partner, Ambassador and Director's Circle members may opt to pay their dues in monthly installments, automatically withdrawn from a personal bank account. Complete the Automatic Monthly Payment Plan authorization form to set up your annual membership using electronic fund transfer payments, and return it along with this membership form to the Museum of Danish America.