

# MEMBERSHIP PRINT AND MAIL FORM

Member Information:

Name(s):

Address:

Email Address:

Phone Number:

Check Membership Level Requested:

- Individual: \$20
- Family: \$35
- Partner: \$50
- Benefactor: \$75
- Patron: \$150
- Corporate: \$500+

Please include check written to Friends of the Museum and mail to:

Attn: Membership  
Friends of the Aiken County Historical Museum  
433 Newberry Street SW  
Aiken, SC 29801