

MAHONE BAY FOUNDERS SOCIETY

2018 Membership Form



Name(s): _____

Address: _____

Email: _____

Phone: _____

Would you like to receive information about museum news and events?

Yes, by email Yes, by mail No, thank you

Would you like to receive information about fundraising campaigns?

Yes, by email Yes, by mail No, thank you

How would you like to receive your 2019 membership renewal?

by email by mail

I am interested in supporting the work of the museum by donating monthly, please send me more information:

by email by mail

Membership Fee

Individual \$15

Family \$25

Business/Corporate \$25

Optional Donation: _____

Total Enclosed: _____

Please send confirmation of membership and tax receipt (if applicable):

By email

By mail

Please mail this form with your payment to:

Mahone Bay Founders Society
PO Box 583, 578 Main Street
Mahone Bay, NS, B0J 2E0

Membership can also be paid online at www.mahonebaymuseum.com