
(Print neatly!)

Appalachian Trail Museum Society Membership

(Print neatly!)

Name(s) _____ Date _____

Address _____ City, State, Zip _____

Phone (with area code) _____ E-mail _____

I would like to become a member / continue for the calendar year 2009 my support of the ATMS. Enclosed is \$20 for my one-year dues.

My organization would like to become a corporate member / continue for the calendar year 2009 our support of the ATMS. Enclosed is \$500 for our one-year dues

I wish to make a Special Donation to the ATMS Building Fund: enclosed is _____ for that purpose.

I wish to donate to the Appalachian Trail Museum Society: enclosed is _____ for that purpose.

All gifts are tax deductible

Make checks or money order payable to the Appalachian Trail Museum Society

Complete this form and mail to A.T. Museum, c/o Rich Evans - Treasurer, P.O. Box 568096, Orlando. FL 32856