

Membership Application

Check one:

New Membership

Membership Renewal, no. _____
(if known)

For museum use only

Admission booth app.

Cash Check Credit

Member number: _____

Type: _____

Expires: _____

Member since: _____

Donation total: _____

Name: _____
(first) (Last) (spouse/partner)

Address: _____
(street)

_____ (city) (state) (zip code)

Phone number: (_____) _____ **Email:** _____

Please list any specialty areas, services, and /or materials you would like to contribute or volunteer for:

Select Membership Type:

Individual \$30 annual
One person benefits.

Additional donation \$ _____

Total contribution \$ _____

Family \$45 annual
A couple or a couple/individual
and dependent children.

Additional donation \$ _____

Total contribution \$ _____

Lifetime \$800 one time
Individual or family benefits for life.
Includes embroidered ball cap.

Additional donation \$ _____

Total contribution \$ _____

Contributions to the Golden Age Air Museum are tax deductible under IRS code 501(c)(3)

Payable to Golden Age Air Museum, 371 Airport Rd. Bethel, PA 19507