

MUSEUMS ALLIANCE MEMBERSHIP FORM

YOUR INFORMATION

Name _____

Address _____

City _____ State _____ Zip _____

Phone (Home) _____ (Work) _____

MEMBERSHIP OPTIONS

_____ Individual \$20

_____ Couple/Family \$30

_____ Patron \$50

_____ Curator \$100

_____ Conservator \$150

_____ Historian \$250

_____ Corporate \$500

RETURN FORM AND PAYMENT TO

Siouxland Heritage Museums Alliance, Inc.,

200 West 6th Street.

Sioux Falls, SD 57104



SIouxLAND
HERITAGE
MUSEUMS
ALLIANCE