



2005
Membership Application
and/or Membership Renewal

Name: *(print both names for family membership)* _____

Address: _____

Phone: _____ E-mail: _____

Type of membership requested: *(Dues are for the calendar year)*

- | | |
|--|--|
| <input type="checkbox"/> Individual (\$15) | <input type="checkbox"/> Supporting (\$200) |
| <input type="checkbox"/> Family (\$25) | <input type="checkbox"/> Life - Individual (\$350) |
| <input type="checkbox"/> Student (\$5) | <input type="checkbox"/> Life - Couple (\$500) |
| <input type="checkbox"/> Business (\$50) | <input type="checkbox"/> Corporate (\$1000) |
| <input type="checkbox"/> Patron (\$100) | <input type="checkbox"/> Benefactor (\$1000) |

My contribution in excess of the designated dues category I desire to be used for *(please check one)*

Historical Guild general fund *or* Hamilton Field museum fund

In addition to my financial support I would be interested in supporting the Guild's work by volunteering some of my time in the following areas: *(select any number)*

- | | |
|---|---|
| <input type="checkbox"/> helping with the newsletter | <input type="checkbox"/> developing the Hamilton Museum |
| <input type="checkbox"/> helping to create exhibits | <input type="checkbox"/> helping with historical research |
| <input type="checkbox"/> serving as a docent on Saturday | <input type="checkbox"/> serving as a midweek docent |
| <input type="checkbox"/> becoming a Guild board member | <input type="checkbox"/> doing occasional committee work |
| <input type="checkbox"/> helping with third grade program | <input type="checkbox"/> making or typing oral histories |
| <input type="checkbox"/> computer cataloging | other _____ |

I have an interest or talent in the following areas which may be useful to Guild projects:

I have the following artifacts or items relating to Novato or Hamilton Field that I would like to offer to the museum: _____

(over, please)

Please return this completed form with your check made payable to the
NOVATO HISTORICAL GUILD.

If you would like to use _____ Visa or _____ Mastercard to pay this contribution, please
complete the following:

Number of card: _____ - _____ - _____ - _____

Expiration date: _____ Amount of this charge: \$ _____

Signature of cardholder

The mailing address of the Guild is:
Novato Historical Guild
75 Rowland Way, #200
Novato, CA 94945

SPECIAL MEMBERSHIP UPGRADE BONUS!

**UPGRADE YOUR YEAR 2003 NOVATO HISTORICAL GUILD
INDIVIDUAL, FAMILY OR BUSINESS MEMBERSHIP TO \$100
OR MORE AND RECEIVE A MUSEUM GIFT SHOPPE 10%
DISCOUNT ON BOOKS, T-SHIRTS, SWEAT SHIRTS, NOTE-
CARDS AND COFFEE MUGS DURING THE ENTIRE YEAR!**

**THANK YOU FOR HELPING THE GUILD FULFILL ITS
MISSION OF "PRESERVING NOVATO'S HISTORY"**