

Yes! I want to support the **OSHKOSH PUBLIC MUSEUM!** Please (circle one) **Renew / Create** a Membership in the following category:

- Senior Citizen (Individual) .. \$15**
- Senior Citizen (Couple) \$25**
- Individual \$20**
- Family..... \$30**
- Contributing \$50**
- Sustaining..... \$100**
- Business/Corporate \$150**

Make corrections or print or type how you want the membership to be listed. If you would like to receive email communications from the museum list your email address. Make checks payable to Oshkosh Public Museum.

Name _____

Address _____

City, State & Zip _____

email address _____

Amount enclosed \$ _____

Charge my credit card:    

Card Number:

Card Code:
(on signature line on the back of your card)

Expiration Date (month, year)

Signature _____

Send completed form to: **OSHKOSH PUBLIC MUSEUM, 1331 ALGOMA BLVD., OSHKOSH WI 54901-2799**

FOR OFFICE USE ONLY:		
DATE	AMT PD	CY/CK#
NEW/RENEW	EXP	M/L#
MC/ACK DT		