

Historical Society of West Point

Membership and Donor Form

Name: _____

Address: _____

Telephone: _____

Email address: _____

I would like to help with HSWP activities

Please choose a membership and/or donation level below, and mail this form and your check, payable to the HSWP, to:

Historical Society of West Point
P.O. Box 1556, West Point, VA 23181

Annual membership

<input type="checkbox"/> Individual	\$25
<input type="checkbox"/> Family	\$35
<input type="checkbox"/> Student (< 21 yrs.)	\$10

Donation levels

Individual / Business / Civic

<input type="checkbox"/> Bronze (< \$300)	\$_____ (1 yr.)
<input type="checkbox"/> Silver (\$300 - \$599)	\$_____ (2 yrs.)
<input type="checkbox"/> Gold (\$600 - \$1000)	\$_____ (3 yrs.)
<input type="checkbox"/> Platinum (> \$1000)	\$_____ (5 yrs.)

Corporate

<input type="checkbox"/> Bronze (< \$500)	\$_____ (1 yr.)
<input type="checkbox"/> Silver (\$500 - \$1999)	\$_____ (2 yrs.)
<input type="checkbox"/> Gold (\$2000 - \$5000)	\$_____ (3 yrs.)
<input type="checkbox"/> Platinum (> \$5000)	\$_____ (5 yrs.)

Sponsors may make payments over the number of years indicated, and will be gratefully recognized in our newsletter.