WISCONSIN MARITIME MUSEUM MEMBERSHIP APPLICATION

APPLICATION	
Cardholder Name:	
Second Cardholder Name:	
Number of children under 18 in family:	
Address:	
City/State/Zip Code:	
Phone:	
Email Address(es):	
MEMBERSHIP INFORMATION	
<u> </u>	Renewal membership
☐ Individual (\$60)	□ Printed copy of The Anchor
☐ Family (\$100)	☐ Additional donation:
Supporting (\$150)	☐ Education
☐ Patron (\$500)	☐ Cobia☐ Collections
☐ Benefactor (\$1,000)	☐ Unrestricted Total Due: \$