

We invite you to become a Museum member or to give a gift membership to someone.

Yes! I want to help Vacaville Museum preserve history in Solano County!

New Membership Renewal Gift Membership

Name(s): _____

Address: _____

City: _____ State _____ ZIP _____

Phone: _____

E-mail: _____

- | | |
|--|-----------|
| <input type="checkbox"/> Participating | \$50.00 |
| <input type="checkbox"/> Supporting/Family | \$75.00 |
| <input type="checkbox"/> Sponsor | \$145.00 |
| <input type="checkbox"/> Principal | \$250.00 |
| <input type="checkbox"/> Patron | \$500.00 |
| <input type="checkbox"/> Benefactor | \$1200.00 |
| <input type="checkbox"/> Life Membership | \$5000.00 |
| (may be paid over a 5 yr. period) | |

In addition, I am including a contribution of \$_____ to assist the museum,, a 501(c)(3), tax exempt organization, in its mission to preserve and promote history and culture in Solano county.

Total amount enclosed\$ _____

Method of payment

- Check (payable to Vacaville Museum)
 Visa or MasterCard

Credit Card # _____

Exp. Date _____

Name on card _____

Signature _____

Please mail this form with your payment. Thank You!
213 Buck Avenue, Vacaville, CA 95688
707 447-4513