

# The Strawbridge Shrine Association

The First Home of American Methodism

## ANNUAL MEMBERSHIP FORM

PLEASE COMPLETE AND RETURN THIS FORM WITH YOUR DONATION

Type of Membership:  
(please select one)

- |  |  |
|--|--|
| <input type="checkbox"/> Individual Membership.....\$40.00     | <input type="checkbox"/> Sustaining.....\$100.00   |
| <input type="checkbox"/> Couple's Membership.....\$60.00       | <input type="checkbox"/> Sponsor.....\$250.00      |
| <input type="checkbox"/> Church / Church Group.....\$100.00    | <input type="checkbox"/> Patron.....\$500.00       |
| <input type="checkbox"/> Youth (under 20 yrs. of age)...\$5.00 | <input type="checkbox"/> Benefactor.....\$1,000.00 |

Date of birth: \_\_\_\_\_

Additional Contribution:  
(please select as many as apply)

- In addition to membership I / We are adding a donation of \$ \_\_\_\_\_
- I would like to support the Preservation Fund with a donation of \$ \_\_\_\_\_
- I would like to support the Barn Restoration Fund with a donation of \$ \_\_\_\_\_
- I / We do not wish to become a member, but please accept a donation of \$ \_\_\_\_\_

Special Gift:

- A donation of \$ \_\_\_\_\_ In Memory of \_\_\_\_\_
- A donation of \$ \_\_\_\_\_ In Honor of \_\_\_\_\_

### ON-LINE / CREDIT CARD / ELECTRONIC PAYMENT OPTION

To access the on-line payment option using your credit card or checking account, visit <http://www.strawbridgeshrine.org/> and click on the tab "Join/Donate."

Member Information:

(please print)

NAME(S) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_

E.MAIL \_\_\_\_\_

PHONE (BEST) \_\_\_\_\_

Please make your check or money order to:

**Strawbridge Shrine Association, Inc.**

PO Box 388

New Windsor, MD 21776

The Strawbridge Shrine Association, Inc., is a non-profit 501(c)(3) entity. Your contribution is tax-deductible.