

Join the Frazier Family. Become a Member Today.

Thank you for your interest in becoming a member of the Frazier History Museum!

Please complete the information below and return this form with payment to:

Frazier History Museum
Attn: Membership
829 West Main Street
Louisville, Kentucky 40202



MEMBERSHIP LEVEL:

- | | | |
|--------------------------|------------------------|---------------------------------|
| <input type="checkbox"/> | INDIVIDUAL..... | \$55 \$35 |
| <input type="checkbox"/> | FAMILY/DUAL..... | \$84 \$64 |
| <input type="checkbox"/> | CONTRIBUTING..... | \$106 \$86 |
| <input type="checkbox"/> | SUSTAINING..... | \$250 \$230 |
| <input type="checkbox"/> | PATRON..... | \$500 \$480 |
| <input type="checkbox"/> | KENTUCKY'S FINEST..... | \$1,000 \$980 |

*DISCOUNTED PRICES VALID THROUGH AUGUST 31, 2020.

Payment Options:

- ☐ Check enclosed (payable to Frazier History Museum)
- ☐ Credit Card:
- ☐ Visa ☐ Mastercard ☐ AMEX

Acct #: _____

Exp Date: _____ CVV: _____

Signature: _____

- ☐ I would like to add a one-year complimentary subscription to *Kentucky Monthly*.
- ☐ Please check here if you wish to add a Smithsonian Affiliate Membership. (Additional \$15 fee applies)

Name for Membership Card(s):

First Name _____ Last Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Number of Children/Grandchildren Under Age 18 _____

Additional Name for Membership Card (Family/Dual level & up only):

First Name _____ Last Name _____

* MEMBERSHIP CARDS WILL BE MAILED WITHIN 2 WEEKS OF RECEIPT OF THIS FORM AND PAYMENT.