

Riley Old Home Society Membership Application

Name: _____

Address: _____

City, State, Zip: _____

E-mail Address: _____

Phone Number: _____

Membership Levels:

- | | | |
|-----------------------------|----------|--------------------------|
| Individual: | \$ 15.00 | <input type="checkbox"/> |
| Family: | \$ 35.00 | <input type="checkbox"/> |
| Sustaining: | \$ 50.00 | <input type="checkbox"/> |
| Corporate (Businesses Only) | \$125.00 | <input type="checkbox"/> |

**If you would like to make a charitable donation to further help us collect, preserve, and interpret the life of James Whitcomb Riley, please indicate your donation amount here:*

Please make all checks out to:
Riley Old Home Society

We would like to know if you would have an interest in assisting with any of the following activities and/or focus groups. Please indicate your interests by checking all of the appropriate boxes.

- Collection Conservation and Care/Archival Support
- Publicity and Communication (Newsletters)
- Historical Research
- Fundraising, Grant Writing, Finance and Endowment
- Public Events and Community Outreach
- Membership, Recruitment, and Promotion

Please Make all checks out to: Riley Old Home Society and return the form to Riley Old Home Society, P. O. Box 1068, Greenfield, IN 46140

For Office Use Only:

Check #:

Input by:

Date: