



PA National Guard Military Museum Association

BLDG 0-11

Fort Indiantown Gap

Annville, PA 17003-5003

717-861-2402

WWW.PNGMILITARYMUSEUM.ORG

Membership Application/Renewal Form

If this is your initial application for membership, please complete both boxes below. If this is a membership renewal, please enter your name and any changes to your contact information in box 1 and select desired membership level in box 2.

If you wish to pay with a credit card or through PayPal, please go to our website.

1. Personal Information

Your personal information will be used to maintain membership rosters and to send you information regarding your membership or upcoming events and activities. We do not sell our membership list to outside groups.

Full Name: _____
(Last) (First) (Middle)

Mailing Address: _____
(Street) (City) (State) (Zip Code)

Email Address: _____

Would you like to receive the newsletter by (choose one): US Mail Email

Phone Number: Home: () _____ Work: () _____ Cell: () _____

Military Service: Yes _____ No _____ *If yes, Regular* _____ *Reserve* _____ *Guard* _____ *Veteran* _____ *Retired* _____

Branch: _____ Unit(s): _____ Total Years Served: _____ Highest Rank: _____

2. Select a Level of Membership

Please select a level of membership. All dues are annual. Please make checks or money order payable to: "PA National Guard Military Museum Association." The PNGMMA is a 501(c) (3) Non-profit organization recognized by the Commonwealth of Pennsylvania. Please send the application form and payment to the above address.

Individual (\$15) Family (\$30) Business (\$100) Life (\$250) Other Gift Amount \$ _____

MUSEUM STAFF ONLY

Date Received: _____

Total Amount: _____ Dues: _____ Donation: _____

Payment Method: _____ Check / MO Number: _____

Date Entered in Past Perfect: _____ Membership Number: _____