

Membership Application

The Harness Racing Museum & Hall of Fame
240 Main Street, Goshen NY 10924
Phone: 845-294-6330 Fax: 845-294-3463
www.harnessmuseum.com development@harnessmuseum.com

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

☐ I accept your invitation to ☐ enroll ☐ renew as a member of the Museum in the following category:

☐ \$35	☐ \$250	☐ \$2,500
☐ \$50	☐ \$500	☐ \$5,000
☐ \$100	☐ \$1,000	☐ \$_____

Membership contributions are deductible for income tax purposes to the extent allowable by law.

- ☐ Please, **No** membership gift(s). Use my entire contribution for operating expenses.
- ☐ I've enclosed my company's matching gift form, to increase my contribution.
- ☐ I want to receive my renewal form by email and have included a valid email address.

PAYMENT:

☐ **My check is enclosed. (Please, U.S. Funds Only!)**
Payable to: The Harness Racing Museum

☐ **Charge my credit card.**

Card #: _____ Exp. Date: _____

Security Code: _____ Billing Zip Code: _____

Signature: _____

☐ Please automatically renew every 12 months with this credit card information.

Do You Need A Gift For A Special Occasion?

Consider a membership to the Museum! You'll receive a tax deductible receipt, the recipient a meaningful gift and the Museum gains additional funding support. Everyone wins!

☐ **I Wish To Purchase A Gift Membership!**

This gift membership is: ☐ NEW ☐ RENEWAL

GIFT MEMBERSHIP CATEGORY:

☐ \$35 ☐ \$50 ☐ \$100 ☐ \$150 ☐ or \$_____

PAYMENT:

☐ My check is enclosed.

☐ Charge my credit card.

Card #: _____ Exp. Date: _____

Security Code: _____ Billing Zip Code: _____

Signature: _____

☐ **Send Gift To Me For Delivery.**

☐ **Send Card And Gift Membership(s) To Recipient.**

GIFT MEMBERSHIP TO:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

GIFT MEMBERSHIP FROM:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Gift Card Should Read:

" _____ "

Walk of Fame

Located at the main entrance of the Harness Racing Museum & Hall of Fame, in a beautifully landscaped setting. The perfect place to honor your favorite people, horses, pets and organizations. Dedicate a 1' square granite paver or 4"x 8" brick with your engraved message.

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

I would like to order _____ **BRICK(S)** at \$300 each (Museum Members \$200) a total of \$_____. *Inscriptions can contain up to 3 lines with no more than 13 characters per line.**

BRICK INSCRIPTION:

PAVERS NOT AVAILABLE AT THIS TIME

* Punctuation marks and spaces between words count as characters.