

Be a Part of Our History as a Museum Member

Enclosed is my membership check for \$_____. (Suggested dues levels at right)

Please, make your check payable to: "Lexington History Museum"

Name (As you want listed)

Full Mailing Address

Optional: Phone and/or e-mail

Areas of Special Interest (i.e. Civil War, equine history, volunteer, etc.)

Please contact me about: **future gifts for the Museum** **sponsoring a program**
 volunteering at the Museum **making a will gift**

Gifts to the Lexington History Museum are tax deductible as allowed by law.

Mail today to: Memberships/LHM, P. O. Box 116, Lexington, Kentucky 40588 - Thank you!

Lexington History Museum

Membership Levels

Student Membership \$10

Individual Membership \$38

Family Membership \$50

Weatherwane Society \$100

Lafayette Circle \$200*

Phoenix Friends \$500*

Thomas D. Clark Society

\$1000/year for five years

Details 859/335-6637