

## MEMBERSHIP APPLICATION

IBERVILLE MUSEUM ASSOCIATION  
PO BOX 701  
PLAQUEMINE, LA 70765

### TYPES OF MEMBERSHIP: (PLEASE CHECK ONE)

**Student \$5.00**

**Individual \$10.00**

**Family \$25.00**

**Contributor \$30.00**

**Donor \$50.00**

**Patron \$200.00**

**Corporate \$500.00**

**Benefactor \$1,000.00**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

\*Emails are used for sending notice of museum special events or exhibits, we do not sell or share email addresses.

I am applying for membership in the Iberville Museum Association. I understand that by paying membership dues for one year that I will become a member and will abide by all rules and regulations of the Iberville Museum Association.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date