

Fauquier Heritage and

Preservation Foundation, Inc.

PO Box 594

Marshall, VA 20116

(540) 364-3440

gottlibrary@gmail.com

APPLICATION FOR MEMBERSHIP

I would like to help support the mission and goals of the Fauquier Heritage and Preservation Foundation, Inc. (FHPF). Please enroll me in the membership category I have marked. My check is included payable to FHPF.

We are a 501(c)(3) organization

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| Х | Categories | Annual Dues ($) |
|  | Student | 20.00 |
|  | Individual | 30.00 |
|  | Family | 40.00 |
|  | Sustaining | 75.00 |
|  | Business Sponsor | 150.00 |
|  | John K. Gott Sponsor | 200.00 |

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Name (If applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*To be completed by FHPF*

*Date entered into system*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_