

MEMBERSHIP APPLICATION

To become a member, please complete this application and submit appropriate dues. Name: ______ Address: City: Zip: Phone Number: Email Address: Check Which Membership you would like: Student: \$5 Individual Senior (+65): \$10 Individual: \$15 Family: **\$20** Non-Profit: \$50 Corporate: \$100 Lifetime Member: \$1000 can be paid over 5-year period Engrave Brick: \$100

Brazoria Heritage Foundation
P.O. Box 1728 202 West Smith
Brazoria, Texas 77422

bhf@brazoriahf.org

Engraved Name Plaque in the Theater: \$200

finance@brazoriahf.org

979-824-0455

979-292-6932