

BOYD HERITAGE MUSEUM

Membership Application

Name(s): _____

Surname First

Surname First

Mailing Address: _____
Street Address

PO Box Town/City Postal Code

(_____) _____
Telephone E-Mail

Type of Membership	Fee	Select	Type of Membership	Fee	Select
Single	\$20		Contributing *	\$150	
Family	\$25		Supporting *	\$300	
Junior **	\$2		Patron (Lifetime) *	\$500	
Donation	\$		Business	\$50	

PLEASE MAKE CHEQUE PAYABLE TO: A. Sheila Boyd Foundation

- * Membership in these categories are recognized on a wall plaque in the Museum unless otherwise directed. A copy of our privacy policy is available upon request.
- ** Junior members (ages 9 – 13) are permitted to act as Assistant Interpreters and to volunteer at our events.

For Museum Use Only	
Payment Rec'd	Membership Card Sent

**PO Box 1221 – 21 Canal Street, Bobcaygeon, Ontario K0M 1A0
(705) 738-9482**