

Membership Form

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Membership Levels (please select one)

- INDIVIDUAL \$35
- YOUNG PRESERVATIONIST \$25
- FAMILY \$60
- ADVOCATE \$100
- BUILDER \$250
- CONSERVATOR \$500
- ARCHITECT \$1000

NAME

ADDRESS

CITY

STATE

ZIP

PHONE

EMAIL

Enclosed is a check in the amount of \$ _____

Please make checks payable to Historic Albany Foundation

Please charge my credit card: Visa Mastercard

CARD NUMBER

EXP. DATE

SIGNATURE

Please mail or e-mail to:
Historic Albany Foundation
89 Lexington Avenue
Albany, NY 12206
info@historic-albany.org

For more information, call 518-465-0876 or e-mail info@historic-albany.org

Thank you for your support!

Your membership is deductible to the extent allowed by the law..