



**Membership Application**

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

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

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

Telephone: \_\_\_\_\_

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

Please check appropriate box for membership type:

	Studebaker National Museum Only	Campus (Studebaker National Museum and Center for History)
<b>Senior</b>	<input type="checkbox"/> \$30	<input type="checkbox"/> \$45
<b>Senior Dual</b>	<input type="checkbox"/> \$45	<input type="checkbox"/> \$65
<b>Individual</b>	<input type="checkbox"/> \$40	<input type="checkbox"/> \$60
<b>Dual</b>	<input type="checkbox"/> \$50	<input type="checkbox"/> \$75
<b>Family</b>	<input type="checkbox"/> \$60	<input type="checkbox"/> \$90

**Sustainer Levels**

	Studebaker National Museum Only	Campus (Studebaker National Museum and Center for History)
<b>Level III</b>	<input type="checkbox"/> \$125 Champion	<input type="checkbox"/> \$200
<b>Level II</b>	<input type="checkbox"/> \$250 Commander	<input type="checkbox"/> \$400
<b>Level I</b>	<input type="checkbox"/> \$500 President	<input type="checkbox"/> \$800

Amount Due: \_\_\_\_\_ Total Enclosed: \_\_\_\_\_

Please make check payable to: Studebaker National Museum. If paying by credit card, please complete the information below:

Credit Card: \_\_\_Mastercard \_\_\_VISA \_\_\_American Express \_\_\_Discover

Credit Card # \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Amount: \_\_\_\_\_

Signature on card: \_\_\_\_\_

Please return application and check or credit card information to:

The Studebaker National Museum, 201 S. Chapin St., South Bend, IN 46601