

# MEMBERSHIP FORM



Yes, I would like to become a Charter Member today

- \$50 First Pitch       \$100 Double  
 \$225 FamFest       \$500 All-Stars  
 \$1,000 Power Hitter       Please Sign Me Up for Auto-Renewal  
 I'd like to make an additional tax-deductible contribution of \_\_\_\_\_

## Member Information

Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_  Home  Cell  
Email \_\_\_\_\_

## Payment Information

Amount Enclosed \_\_\_\_\_  
 Check (Made Payable to the Tampa Baseball Museum)  
 Visa       MasterCard       American Express       Discover  
Credit Card Number \_\_\_\_\_  
Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_  
Signature \_\_\_\_\_

## Primary Member

Name \_\_\_\_\_  
Email \_\_\_\_\_  
 Yes, I would like to receive email updates and event invites.

## Secondary Member (Double Level and Above)

Name \_\_\_\_\_

## Charter Member Recognition

I/We would like to be recognized as \_\_\_\_\_

Mail to:  
Tampa Baseball Museum at the Al Lopez House  
P.O. Box 5421 • Tampa, FL 33675  
[info@tampabaseballmuseum.org](mailto:info@tampabaseballmuseum.org) • 813.400.2353  
TampaBaseballMuseum.org