THE SHARPSTEEN MUSEUM of Calistoga History Dues and Donations Remittance Form

	Please check one:	ase check one: New Membership Memorial Gift		☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐		
Name:	:					
<u>Addre</u>	ss:					
City:			State:	Zip:		
Email:		Phone:				
Annu	al Memberships:		F	Business Sponsorship	S:	
	□Senior Individual	\$25.00		d of the Museum	\$100.00	
	☐Senior Couple	\$40.00	□Busin	ess Sponsor	\$250.00	
	□Individual	\$35.00	□Busin	ess Patron	\$500.00	
	□Family	\$50.00	□Instan	t Wine Cellar Angel	\$2500.00	
	\Box Contributing	\$100.00		8	,	
	□Supporting	\$250.00				
	□Sustaining Angel	\$1,000.00				
	MEMORIAL GIFT:	Amount \$		_		
	In Memory of (Nam	e)				
	In Honor of (Name)					
	Special Occasion					
	How do you wish ca	ard signed?				
	Please send memorial acknowledgement card to:					
	Name					
	Address					
	City, State, Z	ip				
AMOU	JNT ENCLOSED \$	Du	es			
	\$	Gift	Contributio	n/General Donation		
	\$	Tot	tal Enclosed			

Please make checks payable to **Sharpsteen Museum Association**. Please mail to: **Sharpsteen Museum Association**, **P.O. Box 573**, **Calistoga**, **CA 94515**.

Thank you for your support of the Sharpsteen Museum. Your dues and contributions are tax deductible, as allowed by the I.R.S. Federal Tax ID: 94-2639021. www.SharpsteenMuseum.org