



Friends of Tackapausha, Inc.

PO Box 2251

Seaford, NY 11783

friends@tackapausha.com

Membership Application

Please fill out one of these forms if you would like to receive updates and become a member of the Friends of Tackapausha.

NAME: _____

ADDRESS: _____

PHONE # : _____

EMAIL: _____

If you would you like to volunteer for the Friends of Tackapausha Museum group, in what capacity?

Helping to run programs: _____

Community Outreach: _____

Publicity: _____

Trail clean-ups: _____

Other (specify): _____

Membership Fees: (Cash or check. Please make checks payable to *Friends of Tackapausha*)

Circle your level of membership

Individual/Family:	\$15.00	Student:	\$10.00
Senior	\$10.00	Nonprofit Organization	\$25.00
Business	\$35.00		

Please return this form to the address above. THANK YOU!!