



GBHA Individual Membership Form

(Membership valid for 12 months the date dues are received.)

Name: _____

Address: _____

City: _____ State _____ Zip: _____

Telephone: _____ E-mail: _____

GBHA Membership Dues:

- \$50 _____ Museum board members and volunteers, independent professionals, scholars, and others interested in supporting history and heritage
- \$35 _____ Seniors 65+ *(please mail copy of AARP card)*
- \$35 _____ Full-time students *(please mail copy of school ID)*
- \$35 _____ Full-time teachers *(please mail copy of ID card)*

Please make checks payable to the **Greater Baltimore History Alliance.**

Checks and completed form should be submitted to:

Greater Baltimore History Alliance

Attn: Shauntee Daniels

12 W. Madison Street, Ste. 120

Baltimore, MD 21201

Questions: info@baltimoremuseums.org