

Membership Application Form Annual Membership Dues \$50

| Name: | |
|--|--|
| Address: | |
| City, State, zip: | |
| Phone: | |
| Email: | |
| Yes! I want to be a member of Friends of Hayner. | |
| | New Renewal |
| | Enclosed is my gift \$50 for an annual membership. |
| | Yes! I would like to contribute an additional gift of \$ |
| Please | take this gift In Memory of In Honor of |
| Name: | |
| Please noti | fy the following of this gift: |
| Name: | |
| Address: | |

Friends of Hayner is a 501C3 charitable organization. Donations are taxdeductible. Annual membership dues are a minimum gift of \$50. Please complete the membership form above, include a check made payable to Friends of Hayner and return both to:

the Troy-Hayner Cultural Center, 301 W. Main Street, Troy, Ohio 45373 or use your card online at www.TroyHayner.org/friends
For more information call 937-339-0457