



2425 WILSON BOULEVARD · ARLINGTON, VIRGINIA 22201 · WWW.ARMYHISTORY.ORG

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

I wish to JOIN as a...

	1 yr.	2 yr.
Member	<input type="checkbox"/> \$25	<input type="checkbox"/> \$50
Sustaining Member	<input type="checkbox"/> \$50	<input type="checkbox"/> \$100
Charter Member	<input type="checkbox"/> \$100	<input type="checkbox"/> \$200

Life Member (\$1,500 Donation)

In addition to my membership fees, I'd like to also donate an additional \$ _____

Enclosed is my check

Make checks payable to: the Army Historical Foundation

I wish to charge my: VISA MasterCard
 Discover American Express

Acct.#: _____ / _____ / _____ / _____ Exp. ____ / ____

Signature: _____

Recruiter: _____

Automatic Yearly Deductions (please use this box for yearly deductions only):

Yes, I understand my membership contribution will begin this year and will continue each year until such time as I instruct you to stop. (This transaction will remain in effect until we receive notice from you to change or discontinue it). Choose one option below.

Debit my membership contribution to my bank checking account:

Bank Name: _____ Name on Account: _____

Bank Routing Number: _____ Signature: _____

Bank Account Number: _____ Date: _____

I've attached my VOIDED check.

Charge my *automatic yearly* membership contribution to the credit card previously listed.