



National Collaborative for Women's History Sites
Membership Form (rev. 2/28/23)

Date: _____

Membership Status New Membership Renewal without any Change Renewal with Change

Membership Categories

Individuals

- Basic Member: \$40 (One Year) Sponsor: \$100 Patron: \$1,000
 Student/Senior: \$30 (One Year) Benefactor: \$500

Institutions

- Small (budgets below \$400,000): \$50
 Large (budgets above \$400,000): \$100

Contact Information

Name: _____

Title: _____ Organization/Site (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Organization's Web Site: _____

Payment Information

Annual Membership Dues \$ _____

Gift Membership \$ _____

Gift Membership Name & Contact Information: _____

Donation

Donation Amount \$ _____

Specify if donation is for (check one): Peg Strobel Travel Grant NVWT General Operating Fund

Total Enclosed \$ _____

I have enclosed my check payable to **NCWHS**. Mail this form with payment to:

The National Collaborative for Women's History Sites

c/o Alice Paul Institute

PO Box 1376

Mount Laurel, NJ 08054

Email: membership@ncwhs.org

Thank you!

To securely pay online with a credit card, visit www.ncwhs.org

The NCWHS is a 501(c)3 nonprofit organization. Your membership contribution may be tax deductible to the extent allowed by law.