



# REGISTERED MEMBERSHIP BENEFITS

**For every \$25 of your membership your name will go in a drawing for a best of show goose.**

**\*ALL REGISTERED MEMBERS RECEIVE:**

Free admission to the Thousand Islands Museum and all annual events including Decoy/Wildlife Art & Sporting Collectibles Show, membership in TIDCA (Thousand Islands Decoy Carvers Association), use of the Resource Room with free research services, plus 10% discount in the Gift Shop and newsletters. (MEMBERSHIP CARD REQUIRED).

- \$5000 ARCHITECT:** \*LIFETIME MEMBERSHIP- Plaque Recognition  
Includes member, spouse and minor children, 10 Decoy Show passes,  
Selected local artist's print & Ken Harris Decoy
- \$1251+ CONTRIBUTING:** \*LIFETIME MEMBERSHIP- Plaque Recognition  
Includes member, spouse and minor children, 8 Decoy Show passes,  
Selected local artist's print
- \$250 HISTORIAN** (Annually For 5 yrs.= \$1250) \*LIFETIME MEMBERSHIP- Plaque Recognition  
Includes member, spouse and minor children, 6 Decoy Show passes  
TOM HUMBERSTONE DECOY at end of 5 yrs.
- \$100 PATRON:** \*Includes member, spouse and minor children, 4 Decoy Show passes
- \$50 SUPPORTING:** \*Includes member, spouse and minor children, 2 Decoy Show passes
- \$35 FAMILY:** \*Includes member, spouse and minor children, 2 Decoy Show passes
- \$25 INDIVIDUAL:** \*Includes member only, 2 Decoy Show passes

**PLEASE MAKE CHECKS PAYABLE TO: T. I. Museum**

Mail to: P. O. Box 27, 312 James Street, Clayton, N.Y. 13624

Memberships are tax deductible.

If you or your spouse work for, or are retired from a matching gift employer, consider doubling your gift.  
Ask for the forms from your personnel office. Check here if you prefer to remain anonymous in our publications.

**Please Print:**     Mr.     Mrs.     Ms.     Miss     Dr.     Business/Organization

Name: \_\_\_\_\_ New    Renewal    Date: \_\_\_\_\_

**SUMMER MAILING ADDRESS DATES:** \_\_\_\_\_ **TO** \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone #: \_\_\_\_\_

**WINTER MAILING ADDRESS DATES:** \_\_\_\_\_ **TO** \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone #: \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**CHARGE CARD:**    Mastercard/Visa ONLY    # \_\_\_\_\_

Expiration Date (m/y) \_\_\_\_\_ V-Code on back \_\_\_\_\_    Signature \_\_\_\_\_