



Membership Form

Print this form, complete it, and send it with your contribution to:
Raynham Hall Museum
20 West Main Street
Oyster Bay, NY 11771

- New Renewal Gift Membership
 Ms. Miss Mr. Mr. & Mrs. Other

Name (as you wish it to appear on publications)

Address

City, State, Zip

Phone (Home/Cell/Business)

E-Mail

Please check one of the following levels:

- Agent: \$35
 Double Agent (dual/family): \$45
 Agent Provocateur: \$125
 Case Officer: \$250
 Station Chief: \$500
 Spymaster: \$1,000

Business Membership

- Business Friend: \$100
 Business Sponsor: \$250
 Business Patron: \$500

Please charge \$ _____

Visa Mastercard Amex

Account No. _____

Expiration Date _____ CVC _____

Signature _____

Please make checks payable to **Friends of Raynham Hall, Inc.**