



# AZOREAN MARITIME HERITAGE SOCIETY MEMBERSHIP APPLICATION - 2021

Annual membership runs from January 1 to December 31<sup>st</sup>.

Please complete the membership form below and mail it with a check for your membership dues, payable to AMHS. We also accept payment through our website (<http://azoreanmaritime.org/join-donate/become-a-member/>).

<p>Select one membership category and <b>fill in totals to the right</b>:</p> <table><tr><td><input type="checkbox"/> Individual \$ 40</td><td><input type="checkbox"/> Family \$ 65</td></tr><tr><td><input type="checkbox"/> Student \$ 10</td><td><input type="checkbox"/> Harpooner \$ 100</td></tr><tr><td></td><td><input type="checkbox"/> Navigator \$ 200+</td></tr></table>	<input type="checkbox"/> Individual \$ 40	<input type="checkbox"/> Family \$ 65	<input type="checkbox"/> Student \$ 10	<input type="checkbox"/> Harpooner \$ 100		<input type="checkbox"/> Navigator \$ 200+	<p>Please add up totals below:</p> <p>Membership Level \$ _____</p> <p>Boat Fee (\$30/person)* \$ _____</p> <p>AMHS Scholarship Fund \$ _____</p> <p>Boat House Fund \$ _____</p> <p><b>Total: \$ _____</b></p>
<input type="checkbox"/> Individual \$ 40	<input type="checkbox"/> Family \$ 65						
<input type="checkbox"/> Student \$ 10	<input type="checkbox"/> Harpooner \$ 100						
	<input type="checkbox"/> Navigator \$ 200+						

\*Those members who plan to row or sail must also sign the General Release & Boater Registration Form, available online at <https://form.jotform.com/amhs/2020waiver>. To help defray the cost of boat maintenance, an additional \$30 Boat Fee per person is required. Please pay the boat fee and sign the General Release online, or mail this application together with the General Release and payment to our address below.

Name: \_\_\_\_\_ Member Since: \_\_\_\_\_

Street: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**For Family Membership** (2 adults & children under 18 living in the same household), please list each family member individually:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

**Would you like to volunteer or be on a committee?** (please check off interests below)

Membership    Events    Scholarship    Boat Maintenance    Marketing    Waterfront

**Thank you!**

**Azorean Maritime Heritage Society**

**P.O. Box 40942**

**New Bedford, MA 02744**

**[www.azoreanmaritime.org](http://www.azoreanmaritime.org)**

Questions? Email us at [azoreanwhaleboats@gmail.com](mailto:azoreanwhaleboats@gmail.com), or call 508-687-0906.