

Mackinac Associates
Friends Preserving and Sharing Mackinac's Heritage

Membership Form

Names(s) of member(s) for membership card(s):

Mr. Mrs. Ms. Dr. Other _____

Name _____

Street Address _____

City _____ State _____ Zip _____

Phone/Day _____ Phone/Evening _____

E-mail _____

Is this a gift membership?

Yes No If yes, please provide name and address of donor.

Name _____

Street Address _____

City _____ State _____ Zip _____

Membership Categories

- | | | |
|---|---|--|
| <input type="checkbox"/> Mackinac Heritage (\$65) | <input type="checkbox"/> Friend (\$65) | <input type="checkbox"/> Voyageur (\$85) |
| <input type="checkbox"/> Sentinel (\$175) | <input type="checkbox"/> Explorer (\$400) | <input type="checkbox"/> Commandant's Circle (\$600) |
| <input type="checkbox"/> Steward (\$1,000) | <input type="checkbox"/> Guardian (\$2,500) | <input type="checkbox"/> Alumni* |

Membership Amount _____

I wish to make an additional, **unrestricted** donation in support of Mackinac State Historic Parks programs.

Donation Amount _____

I wish to make an additional donation to the Mackinac Associates Education Endowment Fund.

Donation Amount _____

Total Enclosed _____

*Alumni of Mackinac State Historic Parks—All current and former employees and scout leaders and scouts associated with the Mackinac Island Scout Service Camp—receive a 10% discount off the price of any membership category.

Make checks out to "**Mackinac Associates**". If paying by credit card, please provide the following information:

Visa Mastercard Discover
Credit Card Number _____ Exp. Date _____

Signature _____ Date _____