



MEMBERSHIP APPLICATION

Check one: Renewal New Date Submitted: _____

Check one: Individual (\$10.) Joint (\$20.) Family (\$25)

Yearly dues are January to December Total Amount Enclosed: _____

Mr./Mrs./Ms./Dr. _____
first name middle initial last name

Member(s) name: _____

Email Address: _____ Phone : _____

Address: _____

Corporate and Business Sponsors

- A. GOLD - \$1,000.00 This level will include your logo on the BCHA web site, recognition in our bi-annual newsletters, recognition at all events, and a framed certificate. This level is offered for \$1,000.00 for the calendar year.
- B. SILVER - \$500.00 This level will include your logo on the BCHA web site, recognition in our bi-annual newsletters, recognition at all events, and a framed certificate. This level is offered for \$500.00 for the calendar year.
- C. BRONZE - \$250.00 This level will include your logo on the BCHA web site and a framed certificate. This level is offered for \$250.00 for the calendar year.

Business Name: _____ Level: _____

Address: _____ Phone No. _____

Make your check payable to BCHA and send along with your membership form to:

RoseMarie Doxey
1670 Sviskon Way
Idaho Falls, ID 83402

I am willing to serve on the following committee(s):

- | | |
|--|---|
| <input type="checkbox"/> Membership | <input type="checkbox"/> Grants |
| <input type="checkbox"/> Publicity | <input type="checkbox"/> Newsletter |
| <input type="checkbox"/> Historian Clubs | <input type="checkbox"/> Topical Meetings |
| <input type="checkbox"/> Social Events | <input type="checkbox"/> Public Information |
| <input type="checkbox"/> Programs | <input type="checkbox"/> Honors and Awards |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Electronic Media |

Website: www.bonnevilleheritage.org