



Support the Fort! B-17 "Liberty Belle" APPLICATION FOR MEMBERSHIP

OFFICIAL USE - Do not write in this space.

Date Received _____

Type of Membership _____

Sponsor _____

Approved by _____ Name _____ ID# _____

Membership # _____ Date _____

You do not have to be a pilot or military veteran to become a member of Liberty Foundation. Applicants must be 18 years of age or older.

Thank you for helping to support the B-17 "Liberty Belle"! Your contribution will help us to operate the B-17 for future generations to see and enjoy.

You will receive a numbered membership card in the mail. We hope you will be involved with our national B-17 tour, as well as other Liberty Foundation events. We greatly appreciate your support!

CONTACT INFORMATION

NAME _____ D.O.B. _____
Last First Middle

MAILING ADDRESS _____
City State Zip

PHONE (____) _____ (____) _____ (____) _____ (____) _____
Home Business Fax Other

OCCUPATION _____ SPOUSE _____ # OF CHILDREN _____

NAME TAG SHOULD READ: _____
Member Spouse

E-Mail Address: _____ (Your e-mail address will ONLY be used by the Liberty Foundation)

MEMBERSHIP DUES

The LIBERTY FOUNDATION is a self-supporting, privately financed, all-volunteer organization. It is non-profit, tax-exempt and incorporated under the laws of the State of Florida for charitable and educational purposes.

Annual membership dues are: INDIVIDUAL \$40.00 FAMILY \$75.00 LIFETIME \$300.00
 BUSINESS \$500.00

In addition to my membership, I would like to make an additional donation to support the "Liberty Belle" in the amount of: \$ _____.

Method of Payment:

Check payable to THE LIBERTY FOUNDATION Note: PLEASE DO NOT SEND CASH IN THE MAIL.

Mastercard VISA American Express Card # _____ Expiration _____

Signature _____ Date: _____

All membership dues and donations are used to support the Liberty Foundation.