







2024 MEMBERSHIP FORM

Shaping Hamburg's Future

Date: Bu	siness Name (if app	olicable)				
Contact Name:			Email:			
Business/Home Address: Street			City		Zip	
Mailing Address (if different	from above):	Stree	t	City	Zip	
Business/Home Phone:			Mobile:_			
Website and/or Facebook page	ge					
	I	LEVEL OF	MEMBERSH	IP		
Business/Organization Membership \$125			Art Alliance Membership \$35			
Household Membership \$50			Resident Membership \$25			
I would like to give an	additional donation	n to further tl	he great work th	nat OTF is doing to	revitalize our community	
	\$	_Amount of	additional dona	ation		
		PAYM	IENT			
Payment For Membership Enclosed			Please Charge My Credit Card (Visa, Master Card and Discover Card only)			
Holder's Name:						
Type of Card:						
Expiration Date:					Back of Card	
Signature:						
	VOLU	J NTEER O I	PPORTUNITI	ES		
I am intereste	ed in volunteering r	ny talents for	r the following	OTF activities or co	ommittees:	
Community Marketing/Promotions Administrative Se			Services	rvices Arts Alliance		
Downtown Beautification Economic Vitalit			lity Committee	mittee State Street Square/Downtown Events		
Taste of Hamburg-er Festival Fundraising Com			ommittee	mittee Hamburg Strand Theater Committee		
Other Talent or Service (please detail)					
FOR OUR TOWN FOUNDATION USE ONLY						
MI	EM	VOL	WED	TV/MD	AOI	

OUR TOWN FOUNDATION IS A 501 (C) 3 ORGANIZATION - ALL DONATIONS ARE TAX DEDUCTIBLE