



# FRAMS FILL OUT FORM

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

Address: \_\_\_\_\_

City: \_\_\_\_\_

Province: \_\_\_\_\_

Postal code: \_\_\_\_\_

E-mail: \_\_\_\_\_

What level of membership will you be applying for?:

Bronze: \$20 to \$99    Silver: \$100 to \$499    Gold: \$500 to \$999    Platinum: \$1,000 or more

Amount: \_\_\_\_\_

Method of payment:

Cheque payable to Friends of Royal Alberta Museum Society    Money Order    Credit Card

Name on Card: \_\_\_\_\_

Credit Card number: \_\_\_\_\_

Visa or Mastercard?: \_\_\_\_\_ Expiry date: \_\_\_\_ / \_\_\_\_

Cardholder Signature: \_\_\_\_\_

- Yes, I would like to be a FRAMS member.
- Yes, you have permission to publish my name as a supporter.
- Yes, I would like to receive information about Planned Giving.
- Yes, I am interested in FRAMS Volunteer opportunities.

Please send this form to:

Friends of Royal Alberta Museum Society (FRAMS)  
12845-102 Avenue NW  
Edmonton Alberta Canada T5N 0M6

If you need further assistance please call us at (780) 453-9103 or email us at [friends.museum@telusplanet.net](mailto:friends.museum@telusplanet.net)