



**LOUISIANA  
ASSOCIATION  
of MUSEUMS**

**Corporate Membership**

\$250 Corporate Contributor

\$500 Business Associate

\$1,000 Corporate Patron

**MEMBERSHIP APPLICATION**

Name \_\_\_\_\_

Job title \_\_\_\_\_

Institution \_\_\_\_\_

Address \_\_\_\_\_

City, state, zip \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

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

Web site \_\_\_\_\_

I am a \_\_\_ new member

\_\_\_ renewing member

*Please make checks payable to: Louisiana Association of Museums*

*Mail check and completed form to:*

Louisiana Association of Museums

Attn: Membership

P.O. Box 4434

Baton Rouge, LA 70821-4434

For more information, contact LAM at 225-383-6800 or toll free 866-915-4526 via the Web site at [www.LouisianaMuseums.org](http://www.LouisianaMuseums.org)