



Holocaust  
Museum &  
Cohen Education Center  
20 Years of Building Mutual Respect

Use this PDF to mail in your membership form and payment.

		Membership Price:	\$
Please provide your address:	I/we would like to make an additional unrestricted contribution of:		\$
	Total Enclosed:		\$
	Make checks payable to: Holocaust Museum of Southwest Florida		
	Credit Card #: _____		
Exp. Date: _____		Security Code _____	
Signature: _____			
I authorize payment for the above total.			
Please provide your email:			
Please provide your tel #:			
We don't sell your email address or phone number.			
Membership Levels	Name(s) of Adult(s)	# of Children and/or Grandkids	Price
Student (1 Named Student)			\$18
Individual (1 named Adult)			\$45
Family (2 named Adults + children or grandkids under age 21 years of age)			\$70
Sustaining (2 named Adults + children or grandkids under age 21 years of age)			\$250
Builder (2 named Adults + children and grandkids under 21 years of age)			\$1000

Please mail this form with your payment to:

Holocaust Museum & Education Center  
975 Imperial Golf Course Blvd, Suite 108  
Naples, FL 34110

Questions? Call us at 239-263-9200 ext. 207 or email us at [tim@hmcec.org](mailto:tim@hmcec.org).

Thank you for your support!