

Seashore Trolley Museum
Business Membership
Application

We enclose ANNUAL Membership dues based on our number of full time equivalent employees:

___ 1-5	Employees	(2 SFP)	\$60
___ 6-25	Employees	(5 SFP)	\$150
___ 26-50	Employees	(10 SFP)	\$300
___ 51-100	Employees	(20 SFP)	\$600
___ Over 100	Employees	(30 SFP)	\$900

In addition to the Seasonal Family Passes (SFP), your business receives an equal number of Day Passes, good for one day admission, for use as gifts to customers and friends.

Passes are valid for any REGULAR admission days.

Membership fee enclosed: \$ _____

Additional Contribution of: \$ _____

Total enclosed: \$ _____

Make checks payable to: N.E.E.R.H.S.

If paying by Credit Card:

Card # _____

Card Exp date _____ 3-digit Sec code _____

Company Name _____

Contact Name _____

Mailing Address _____

City _____ State _____ Zip _____

Web Site _____

Email _____

**So we can display your logo on our lobby wall please
e-mail a hi-res JPEG or PDF of your logo to:
director@neerhs.org**

**Seashore Trolley Museum
P.O. Box A, Kennebunkport, ME
04046**