



# German-Texan Heritage Society

Promoting Awareness and Preservation of the  
German Cultural Heritage of Texas Since 1978  
2011 MEMBERSHIP FORM

Renewal	<input type="checkbox"/>
New	<input type="checkbox"/>
If New, how did you find us?	
_____	

Salutation:  Mr.  Mrs.  Ms.  Other: (list) \_\_\_\_\_

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

Other Household Member(s):: \_\_\_\_\_  
(If joining in the family, patron or life categories)

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip + 4: \_\_\_\_\_ - \_\_\_\_\_

Phone (H): (\_\_\_\_) \_\_\_\_\_ Phone: (C) (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

How do you wish to receive the bi-monthly newsletter, *Schulhaus Reporter*?  Email Only OR  USPS Mail Only

**TELL US ABOUT YOUR GERMAN-TEXAN INTERESTS**

Culture  Genealogy  History  Preservation  Writing & Research  Language Classes  
 German Interest Tours  Festivals  Social Activities  German Films  Lecture Programs  
 Other: \_\_\_\_\_  I can be a contact person in my area

German Language Ability:  None  Beginning  Intermediate  Advanced  Fluent

**Yes, I want to Join/Renew!**  
Establish my membership in the category checked below:

CATEGORY	ANNUAL DUES: Jan—Dec (July-Dec—1/2 Price - New Members Only)
Life Member	<input type="checkbox"/> \$1000 (one time pmt; 1/2 price not applicable)
Patron	<input type="checkbox"/> \$ 100
International (includes international shipping)	<input type="checkbox"/> \$ 65
Family (2 or more at same address)	<input type="checkbox"/> \$ 50
Library/Society	<input type="checkbox"/> \$ 40
Individual	<input type="checkbox"/> \$ 35
Student (w/ valid ID)	<input type="checkbox"/> \$ 20 (no printed material; e-mail only)
<b>TOTAL DUES PAID</b>	<b>\$</b> _____

**Please Donate!**  
Member dues account for only a small portion of our income. Donations and other fundraising efforts must account for the remaining needs.

Annual Operating Fund	\$ _____
German Free School Preservation Fund ( Lot 507)	\$ _____
Development Fund for Lot 505 (Festival Performance Area)	\$ _____
Trenckmann Library Fund	\$ _____
Statewide Outreach Fund	\$ _____
Student Scholarship Fund	\$ _____
<b>TOTAL AMOUNT DONATED</b>	<b>\$</b> _____

Please make my donation in honor of or in memory of (circle one)

(Name): \_\_\_\_\_

**GTHS is a 501 (c)(3) non-profit corporation. All contributions are tax-deductible to the extent allowed by law.**

**Payment Information:**  Check  MasterCard/Visa Total Paid: \$ \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ V-Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please make checks payable to **GTHS**. If you pay by credit card, please sign above. Complete this form and mail along with your payment to: GTHS, P.O. Box 684171, Austin, TX 78768-4171

Rev. 12/10