



Circle of Friends

The Juliette Gordon Low Birthplace
Museum Membership Group

Annual Individual Membership Application

Please select your desired membership level and fill in the necessary details below.

Member Information

Title (Ms./Mrs./Miss/Dr./Mr.): _____ First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

I would like to receive news and events concerning the Birthplace. YES NO

Membership Levels

Please check the appropriate box for your desired membership level.

Level 1

\$60 per individual

*\$100 per family**

- Free admission during membership year
- Circle of Friends pin for adults upon request (1st year)
- Monthly newsletter

Level 2

\$150 per individual

*\$200 per family**

- All Level 1 benefits
- Opportunity to purchase a Savannah Salon membership
- 2 guest tickets per year

Level 3

\$500 per individual

*\$600 per family**

- All Level 1 benefits
- Opportunity to purchase a Savannah Salon membership
- 4 guest tickets per year
- On-site donor wall recognition
- Gift membership for a friend or young alum
- Behind the scenes tours of season programming with other COF members
- 10% event rental discount
- 10% store discount
- Invitation to purchase triennial Homecoming tickets



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Level 4

*\$1,000 (includes
family)*

- All Level 1 benefits
- Opportunity to purchase a Savannah Salon membership
- 20 guest tickets per year
- On-site donor wall recognition
- Gift membership for a friend or young alum
- Private behind the scenes tours of season programming
- 15% event rental discount
- 10% store discount
- Complimentary Annual Homecoming tickets

*Family includes a couple and the children who still live in their home.

Payment Information

Method of Payment: Visa MasterCard Amex Discover Check

Card Number: _____ **Expiration Date:** ____ / ____ **CVV:** _____

Signature: _____

Date: _____

Additional Gift Information (Optional)

I prefer to make this donation anonymously

This gift is (circle one) In Memory Of / In Honor Of _____

Please notify (name and address)

Upon completion, mail this form to:

Girl Scouts of the USA
Fund Development
P.O. Box 5046
New York, NY 10087-5046