



Friends of the Randell Research Center

Pineland, Florida • March, 2008
Phone (239) 283-2062 E-mail: randellcenter@comcast.net

Dear Friend,

You are cordially invited to join, or renew your membership in, the RRC's support society, *Friends of the Randell Research Center*. All Friends of the RRC receive a quarterly newsletter and free admission to the Calusa Heritage Trail at Pineland. Supporters at higher levels are entitled to discounts on our books and merchandise, advance notice of programs, and special recognition. Your continuing support is vital to our mission. It means more research, more education, and continued site improvements at the Randell Research Center. Thank you.

Sincerely,

William H. Marquardt
Director
Randell Research Center

Please check the membership level you prefer, and send this form with credit card information or check payable to Randell Research Center, to:

Membership Coordinator • Randell Research Center • PO Box 608 • Pineland, Florida 33945

- Individual (\$30) and Student (\$15):** quarterly Newsletter and free admission to Calusa Heritage Trail
- Family (\$50):** The above + advance notice and 10% discount on children's programs
- Contributor (\$100-\$499):** The above + annual honor roll listing in newsletter + 20% discount on RRC publications and merchandise
- Sponsor (\$500-\$999):** The above + invitation to annual Director's tour and reception
- Supporter (\$1,000-\$4,999):** The above + listing on annual donor plaque at Pineland site
- Sustaining Members (\$5,000-\$19,999), Benefactors (\$20,000-\$99,999), and Patrons (\$100,000 and above)** receive all of the above + complimentary RRC publications and special briefings from the Director.
- Please use my gift** to obtain matching funds from the National Endowment for the Humanities.

Permanent Address

Name _____
Address _____
City / State / Zipcode _____

Seasonal Address (so we can send you your newsletter while you are away)

Name _____
Address _____
City / State / Zipcode _____

Use my seasonal address from _____ to _____.
(date) (date)

Name as it appears on card (please print): _____

Billing address and zipcode (please print): _____

Card type (check one): Visa Mastercard
 American Express Discover

Card number: _____
Expires: _____ / _____
(month) (year)

Amount charged: \$ _____ Date: _____

Signature of card holder: _____