



**BUTTERFIELD NATIONAL HISTORIC TRAIL ASSOCIATION**

**MEMBERSHIP APPLICATION**

(January 1, 2023 -December 31, 2023)

Name \_\_\_\_\_

Address \_\_\_\_\_

City State Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**Membership Levels**

Basic Individual \$25-\$99

Sponsor \$100-\$499

Patron \$500-\$999

Benefactor \$1000+

Student \$10 (enclose copy of college ID  
or, for minor's birth certificate)

**PLEASE FILL OUT**

**Membership Level:**

\$25 + \$ \_\_\_\_\_ \* = \$ \_\_\_\_\_ (determines membership level)      \$ \_\_\_\_\_

Extra donation\*

**MEMBERS WHO JOIN BEFORE December 31, 2023, will be designated as CHARTER MEMBERS,**

**Number of Additional Chapter Affiliation (All levels of membership include one state chapter affiliation. Each additional chapter is \$10 each).**

Primary state affiliation \_\_\_\_\_

AR      AZ      CA      MO      OK      TX      NM      \$ \_\_\_\_\_

Please circle additional state chapter(s) affiliation.

\_\_\_\_\_ Check this box if you do not want a chapter affiliation and just want a national membership.

**TOTAL ENCLOSED**      \$ \_\_\_\_\_

Please mail to Butterfield National Historic Trail Association, 6700 Western Trails Drive, Springdale, AR 72762. Questions call Marilyn Heifner 479-530-0676.

BNHTA Office Use Only:	Receipt Number _____	Expiration Date _____
Check Number _____	Amount Paid _____	State Chapter(s) AR AZ CA MO OK TX NM
Received by _____	Date Processed _____	Accounting _____