	I am: L A New Member L Renewing My Membership		
	Name		
	Title		
	Institution/Business Name		
	Mailing Address		
•	City, State, Zip code		
	Work Phone Fax Number		
	Email*		
	ou will automatically be added to the FAAHPN Updates Newsletter email distribution list. ease check here if you would also like to receive my FAAHPN newsletter via US Mail		
	EMBERSHIP SECTOR		
	e sector designation is included with each membership. Please indicate the sector with which wish to be primarily associated. ART HISTORY SCIENCE		
AN	NUAL MEMBERSHIP DUES		
	STITUTIONS (GALLERIES, HISTORIC HOMES, HISTORICAL SOCIEITIES,		
	BRARIES, ARCHIVES) \$50 – Annual Budget: \$0 - \$50,000		
	\$75 – Annual Budget: \$50,001 - \$100,000		
\mathbb{H}	\$100 – Annual Budget: \$100,001 - \$250,000		
H	\$150 – Annual Budget: \$250,001 - \$500,000 \$200 – Annual Budget: \$500,001 - \$1,000,000		
	\$250 – Annual Budget: Over \$1,000,000		
	\$125- 1 representative may attend the annual conference at member fee. \$250- 2 representatives may attend the annual conference at member fee. \$500- 3 representatives may attend the annual conference at member fee.		
INDIVIDUAL (ADVOCATES, SENIORS, STUDENTS) \$25 per membership			
Sig	pnature: Date:		

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FLORIDA AFRICAN AMERICAN



Member Knowledge, Skills and Abilities		
Please indicate the area(s) of expertise that you and your organization specialize in.		
Administration, Operations and Governance		
Board Training and Development		
Collections Management/ Curatorial Issues		
Education		
Exhibition Creation		
Expansion, Construction or Renovation Management		
Facility Management		
Fundraising		
Grant Writing		
Human Resources—Staff Supervision or Performance Evaluations		
Long Range Planning		
Marketing and Development		
Museum Collections		
Museum Exhibitions		
Museum Programs		
Museum Operations		
Public or School Program Development		
Public Relations—Working with the Media		
Volunteer Programs and Issues		
Other (Please Specify):		

Signature: _____ Date: ____



MEMBER BENEFITS SELECTION

Please update my profile to reflect my interest in the following FAAHPN Member Benefits; my initial indicates that I understand that my access to these benefits will not be granted unless my application is completed in its entirety	
 Exhibit Sharing Exhibit To Share Would Like To Host Exhibit Name of Exhibit: 	
Estimated Cost of Shipping & Insurance:	
Number of Items in Exhibit:	
 □ Internship Funding Send one-page letter of intent (log-in to the member portal at www.faaphn.com for an example) to FAAPHN that outlines: How the internship matches current institutional objectives, Core tasks for the intern (please be specific) The desired final product or outcome of the intern's work Any additional benefits your institution can offer the intern Advertise the internship within a month of award notification from FAAHPN and hold a open application process using FAAHPN and other free advertising resources Complete the FAAHPN Internship Packet, which includes: Internship Award Letter Internship Contract Invoice Template 	an
FAAHPN Technical Assistance Program (please complete Page 4 of this application) This member benefit provides advice and guidance to small or emerging herital preservation institutions using the resources and expertise resident in established museur around the state. As a result, not only do members receive valuable feedback on the programs and operations, but the museum community and Network are strengthenesthrough the collaborative effort of professionals reaching out to share their knowledge the field.	ns eir ed
Signature: Date:	



FAAPHN TECHNICAL ASSISTANCE PROGRAM

This member benefit provides advice and guidance to small or emerging heritage preservation institutions using the resources and expertise resident in established museums around the state. Please rank your top 5 needs in the following technical assistance areas based on priorities for the organization:

Administration, Operations and Governance	
Board Training and Development	
Collections Management/ Curatorial Issues	
Exhibition Creation	
Expansion, Construction or Renovation Management	
Facility Management	
Fundraising	
Grant Writing	
Human Resources—Staff Supervision or Performance Evaluations	
Long Range Planning	
Marketing and Development	
Museum Collections	
Museum Exhibitions	
Museum Programs	
Museum Operations Collections, Exhibitions, or Programs	
Public or School Program Development	
Public or School Program Development Public Relations—Working with the Media	
Volunteer Programs and Issues	
Other (Please Specify):	
In the space provided, briefly describe the ideal solution and outcome you hope to receive from this service. Please attach additional sheets as necessary.	
Signature: Date:	

Please Note: Your request for member benefits will not be fulfilled until your full membership payment is processed. You may submit your completed application and payment via U.S. Postal mail using the contact information below. You may also complete this application and submit your payment for faster processing online at www.faahpn.com.

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