

Statement of Mission

The Halls Crossroads Historical Museum seeks to preserve the history of the community by collecting and displaying documents and artifacts for use by current and future generations.

Dear Patron:

The Board of Directors of the Halls Crossroads Historical Museum is committed to founding a museum that will preserve the rich history of the community. Establishing the museum ensures that future generations will recall with pride the founding fathers of the community and their vision for the future.

Thank you for your interest and support as we embark on this exciting journey.

Officers and Board of Directors, Halls Crossroads Historical Museum

This form may be used to make a donation or to apply for membership. Membership information is below. Donation information is on the reverse side.

MEMBERSHIPS:

Types of Membership	Amount	Duration	Benefits
Hubert LaRue	\$10,000	Lifetime (1 time gift)	Lifetime membership for one person and guests. Recognition on plaque in museum. Invitation to special events and quarterly meetings.
Charter	\$5,000	Lifetime (1 time gift)	Lifetime membership for one person and guests. Recognition on plaque in museum. Invitation to special events and quarterly meetings.
Corporate	\$500	Annual	Membership for one person and guests for one year. Invitation to special events and quarterly meetings.
Crossroads/ Family	\$100	Annual	Membership for one person and guests for one year. Invitation to special events and quarterly meetings.
Friend	\$25	Annual	Membership for person for one year. Invitation to special events and quarterly meetings.

Membership cards will be issued with a unique number for each member.
Annual memberships are 12-months beginning in January.

Detach here and mail completed form and check for the Total Amount to: HCHM, P.O. Box 71043, Knoxville, TN 37938

Name _____

Address _____

Street City State Zip

Email _____ Telephone _____

Type of Membership/Amount: **Lifetime** Hubert Larue \$ _____ **Lifetime** Charter \$ _____

Annual: Corporate \$ _____ Crossroads/Family \$ _____ Friend \$ _____

Membership (this page) \$ _____

Donations (from reverse) \$ _____

TOTAL ENCLOSED: \$ _____

THANK YOU FOR YOUR SUPPORT. WE ARE A 501c3 ORGANIZATION.