



WOODS HOLE HISTORICAL MUSEUM

Office Use Only
Date recvd: _____
Recvd by: _____

8th Annual Oyster Event Summer Fundraiser Registration Form

Friday, August 23, 2019 5 to 7 PM

Name _____

Street Address _____

Town/City/Zip _____

Telephone _____ Email _____

Number of Reservations:

_____ WHHM Member @ \$40 per person \$ _____

_____ Non-member @ \$50 per person \$ _____

Additional Donation to WHHM: \$ _____

TOTAL Amount I am Paying: \$ _____

IMPORTANT: There are no physical tickets. This completed form, along with payment, will confirm your reservation to the event. You may PRINT this form and mail with your payment to: Woods Hole Historical Museum, 579 Woods Hole Road, Woods Hole, MA 02543 or email to whhmdirector@gmail.com, or deliver to the Museum in person.

Payment Information:

Check provided (made out to Woods Hole Historical Museum)

Cash

Please charge my credit card Visa MCard

Account # _____ Exp: _____ CSV: _____

Thank you for supporting the Woods Hole Historical Museum!