

Appendix A

**Historic Richmond Association
Membership Application and Information Form**

Membership type: Individual Business

Name of Business: _____

Contact Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Website: _____

History of Career/Professional Experience: _____

Prior Volunteer Activity: _____

Areas of interest for voluntary service participation:

Event level interest:

- | | |
|----------------------------------|----------------------------|
| Logistics | Marketing |
| Social Media | Vendor Coordination |
| Event Coordination – Major event | Sub-committee coordination |
| Volunteer Coordination/Check-in | Volunteer supervision |
| Sponsorship Development | Photography |

Association Administration level experience:

- | | |
|---------------------------|-------------------------|
| Administration support | Financial Recordkeeping |
| Record meeting activities | Website management |
| Membership Development | Program Development |
| Grant Writing | |

Applicant Signature:

Date:

Association use only:

Accepted Dues Paid: Amount Date:

After filling out the entire form, please email it to hra.rtx@gmail.com. You will receive a confirmation of receipt within four days. If you do not receive a response within three business days, you can reach out to vendor.hra.tx@gmail.com.