







2025	MEMBERSHIP FORM *Shaping Hamburg's Future*	
Date: Business Name (i	applicable)	
	Email:	
Pusinaga/Hama Addraga		_
Street	City Zip	
Mailing Address (if different from above): _	Street City Zip	
Business/Home Phone:	Mobile:	
Website and/or Facebook page		
	LEVEL OF MEMBERSHIP	
Business/Organization Membership	\$125 Art Alliance Membership \$35	
Household Membership \$50	Resident Membership \$25	
I would like to give an additional don	tion to further the great work that OTF is doing to revitalize our commu	ınity
\$	Amount of additional donation	
	PAYMENT	
Payment For Membership Enclosed	Please Charge My Credit Care	d
	(Visa, Master Card and Discover Card o	
Holder's Name:		
	Number:	
Expiration Date: Zip Code	: 3 Digit Security Code on Back of Card	
Signature:		
V	DLUNTEER OPPORTUNITIES	
I am interested in volunteeri	ng my talents for the following OTF activities or committees:	
Community Marketing/Promotions	Administrative Services Arts Alliance	
Downtown Beautification	Economic Vitality Committee State Street Square/Downtown Ev	rents
Taste of Hamburg-er Festival	Fundraising Committee Hamburg Strand Theater Committee	tee
Other Talent or Service (please detail)		
EOD		
FOR	OUR TOWN FOUNDATION USE ONLY	
MLEM	VOLWEBTY/MPAOL	
OUR TOWN FOUNDATION IS A 501 (0) 3 ORGANIZATION - ALL DONATIONS ARE TAX DEDUCTIE	BLE
For more information	lease contact Our Town Foundation at 610-562-3106	

Email: otfmanager@aol.com