



HISTORIC PRESERVATION ALLIANCE OF COLORADO SPRINGS

Helping preserve and protect Colorado Springs' unique heritage

P. O. Box 345, Colorado Springs, CO 80901

www.hpasprings.org

2024 MEMBERSHIP CATEGORIES AND BENEFITS – For New and Renewing Members

Champion of Preservation <i>In honor of all those who have impacted the preservation of our historic heritage.</i> <ul style="list-style-type: none">• 2 member cards and 8 guest passes to share• Special recognition throughout the year	\$1,000	_____
Friend of General William Jackson and Queen Palmer <i>In honor of the visionary leader, and his wife, who founded Colorado Springs.</i> <ul style="list-style-type: none">• 2 member cards and 6 guest passes to share• Special recognition throughout the year	\$500	_____
Friend of Winfield Scott Stratton <i>In honor of the generous man who dared to dream, a skilled carpenter turned millionaire and philanthropist.</i> <ul style="list-style-type: none">• 2 member cards and 4 guest passes to share• Special recognition at our annual Awards Event	\$250	_____
Friend of Helen Hunt Jackson <i>In honor of an extraordinary author and woman who throughout her life supported preservation, Conservation and human rights.</i> <ul style="list-style-type: none">• 2 member cards and 3 guest passes to share	\$100	_____
Friend of Thomas MacLaren <i>In honor of a talented and dedicated architect, whose buildings grace the historic landscape of Colorado Springs including City Auditorium, City Hall, and Pauline Chapel.</i> <ul style="list-style-type: none">• 2 member cards and 2 guest passes to share	\$ 60	_____
Friend of Alice Bemis Taylor <i>In honor of a woman whose generosity resulted in the Fine Arts Center, Colorado Day Nursery, Grace Episcopal Church and more.</i> <ul style="list-style-type: none">• 1 membership card and 1 guest pass to share	\$ 40	_____

Your membership support is essential to keep the HPA alive and thriving so we may continue our preservation work.

Check our website for online events, lectures, trainings and workshops!

NAME _____ DATE _____

MAILING ADDRESS _____

CITY/STATE/ZIP CODE _____

PHONE _____ EMAIL* _____

***Email is our primary means of communication. Please always keep us updated with your current email address!**

**Please mail your check with this membership form today OR
join/renew online (via our secured PayPal account) at www.hpasprings.org.**