



Membership Form

Name _____

Address1 _____

Address2 _____

City, State, Zip _____

Day/Evening Phone _____

Email _____

Membership Levels

- \$35 Individual
- \$60 Household
- \$100-\$499 Sponsor
- \$500-\$999 Benefactor
- \$1000 and up Patron

Donations

- Capital Campaign \$ _____
- General Operating \$ _____
- Outreach \$ _____

Method of Payment

- Check# _____ Cash \$ _____
- Credit card type: Visa MasterCard
- Discover AMEX

Account # _____

Exp ____/____ Security Code _____

Signature _____

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Office Use Only:

Date Received _____ Exp Date _____