



Earthplace

The Nature Discovery Center

Membership Form

Annual Membership (please check one):

<input type="checkbox"/> Senior (62+)	\$25	<input type="checkbox"/> Sponsor	\$125	<input type="checkbox"/> Benefactor	\$1000
<input type="checkbox"/> Individual	\$35	<input type="checkbox"/> Friend	\$250		
<input type="checkbox"/> Family	\$75	<input type="checkbox"/> Patron	\$500		

Salutation (circle one): Mr. Mrs. Ms. Mr. & Mrs. Dr. Rev.

Name (First, last): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Payment Amount: \$ _____ Check Credit Card (circle) Mastercard Visa AMEX

Name on Card: _____

Card Billing Address: _____ City, State, Zip _____

Credit Card # _____ Security Code on Back of Card: _____

Exp. Date (Month/Year) _____ Signature: _____

Please list the name of everyone in your household who will be making use of this membership:

Adult names: _____

Children names: _____

Your right to privacy is very important to us. We recognize that providing us with personal information is an act of trust. We will not share or use this information for any purpose other than to maintain Earthplace membership information.

###

Does your employer match contributions? If yes, please consider requesting a matching contribution.