



MEMBERSHIP ACCEPTANCE

Member Name #1:

M ____ . _____

Member Name #2:

M ____ . _____

(applicable for Family level and above)

Address _____

City _____ State _____ Zip _____

Phone Number _____ E-mail _____

Yes! I would like to renew my Mass Audubon membership at the level checked below.

- | | |
|---|--|
| <input type="checkbox"/> Leadership Friend - \$1,250+ | <input type="checkbox"/> Contributor - \$100 |
| <input type="checkbox"/> Guardian - \$750 | <input type="checkbox"/> Family Plus - \$80 |
| <input type="checkbox"/> Patron - \$500 | <input type="checkbox"/> Supporter - \$70 |
| <input type="checkbox"/> Sponsor - \$250 | <input type="checkbox"/> Family - \$58 |
| <input type="checkbox"/> Protector - \$150 | <input type="checkbox"/> Individual - \$44 |

I can't renew today, but here is my gift of \$ _____

My employer will match this membership contribution. Name of company: _____

- Enclosed is my check payable to Mass Audubon

Please charge to my MasterCard or Visa or Discover
Card # _____
Expiration Date _____
Signature _____

Please mail your application and tax-deductible contribution to:

Mass Audubon • Attn: Member Services • 208 South Great Road • Lincoln, Massachusetts 01773
tel 781.259.9500 • fax 781.259.8899 • www.massaudubon.org