



## MEMBERSHIP APPLICATION

New membership  Renewal membership  Gift membership

How did you hear about us? \_\_\_\_\_

*Support the Arboretum through a FOTA Membership!*

\$35 Individual     \$100 Patron     \$500 Sustaining

\$50 Family     \$250 Contributor     \$1000 Fellow

Membership(s) \$ \_\_\_\_\_

Gift Membership(s) \$ \_\_\_\_\_

Additional Gift to Support the Arboretum \$ \_\_\_\_\_

TOTAL CONTRIBUTIONS \$ \_\_\_\_\_

METHOD OF PAYMENT (check one)

Check (payable to Friends of the Arboretum)

Credit Card     MasterCard     Visa

Name on Card (please print) \_\_\_\_\_

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

Please send information on:  Volunteer Opportunities     Gifting

### PERSON(S) BECOMING MEMBER OR GIVING GIFT MEMBERSHIP

Print name(s) clearly. Indicate two names for family level membership and above if appropriate.

Name#1 \_\_\_\_\_

Name#2 \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

### PERSON(S) RECEIVING GIFT MEMBERSHIP

Print name(s) clearly. Indicate two names for family level membership and above if appropriate.

Name#1\_\_\_\_\_

Name#2\_\_\_\_\_

Address\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone\_\_\_\_\_

E-mail Address\_\_\_\_\_