



# Gift Membership Form

Squam Lakes Natural Science Center PO Box 173 Holderness, NH 03245

Please fill out the following form, and mail to us.

**Please provide the following contact information:**

**Your Name:** \_\_\_\_\_

Permanent Mailing Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_

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*Adult 1:*

**First Name** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

*Adult 2:*

**First Name** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

Permanent Mailing Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Mobile 1: \_\_\_\_\_ Mobile 2: \_\_\_\_\_

Email 1: \_\_\_\_\_

Email 2: \_\_\_\_\_

Seasonal Mailing Address: \_\_\_\_\_

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

Seasonal Phone: \_\_\_\_\_

Seasonal Mailing Dates: From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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\_\_\_\_ Please send membership card to me.

\_\_\_\_ Send membership card to recipient with a gift message, reading:

A gift from \_\_\_\_\_

Next year, please send the renewal notice for this gift \_\_\_\_ to me \_\_\_\_ to recipient.

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Please select the membership category you wish to purchase. We accept MasterCard, Visa, American Express or Discover credit cards and personal checks.

\$50 One-Person

\$180 Wetlands

\$60 Two-Person

\$250 Field

\$90 Four-Person

\$500 Forest

\$120 Six-Person

\$1000 Mt. Fayal

\$150 Eight-Person

My Check is enclosed, payable to SLNSC

Please charge my:  MasterCard  Visa  AmEx  Discover

No. \_\_\_\_\_ Exp. Date \_\_\_\_\_ CID \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

Printed Name on Card: \_\_\_\_\_