

## **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:

Adult 1: First Name \_\_\_\_\_ Last Name: Adult 2: First Name Last Name: Permanent Mailing Address: City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_ Mobile 1: Mobile 2: Email 2: \_\_\_\_\_ Please send membership renewal notices by email. Please send the quarterly *Tracks & Trails* newsletter by email. \_\_\_\_ Check here to receive periodic email updates. Seasonal Mailing Address: City: \_\_\_\_\_ State: \_\_\_\_ Zip: Seasonal Phone: Seasonal Mailing Dates: From / / to / / Please select the membership category you wish to purchase. We accept MasterCard, Visa, American Express or Discover credit cards and personal checks. \_\_\_\_\_\$250 Wetlands \$60 One-Person \_\_\_\_\$500 Field \$75 Two-Person \$750 Forest \$120 Four-Person \$150 Six-Person \_\_\_\_\_\$1000 Mt. Fayal \_\_\_\_\_\$180 Eight-Person \_My Check is enclosed, payable to SLNSC Please charge my: \_\_\_\_\_MasterCard \_\_\_\_\_Visa \_\_\_\_Am Exp \_\_\_\_Discover \_\_\_\_\_ Exp. Date \_\_\_\_\_ CID\_\_\_\_ Cardholder Signature: Printed Name on Card: \_\_\_\_\_ I have named Squam Lakes Natural Science Center in my estate plans. I want to volunteer. Please contact me.