

Connect and Care

Please print and mail this page with your contribution

Name(s)	Additional Donation I/we wish to make a contribution of:
Address	□ \$50 □ \$100 □ \$500 □ \$1000
CityStateZip	Other
Telephone	☐ I would like to make my gift as a tribute
- "	\Box in honor of
Email	☐ in memory of
☐ Join ☐ Renew	Name
For Membership, choose one:	
☐ Woodland Friends @ \$250	☐ Gift Membership at the level of \$
☐ Wetland Friends @ \$100	Name
☐ Prairie Friends @ \$50	Address
☐ Family @ \$35	City State Zip
☐ Individual @ \$20	
☐ Student @ \$10	\square Mail a letter on my/our behalf to
□ Other	Name
☐ I would like to receive information about	Address
volunteer work	City State Zip
$\ \square$ I would like to go paperless and receive my newsletter by email	☐ I would like my gift to be anonymous

☐ Enclosed is my check payable to: Friends of the Lakeshore Nature Preserve

Mail this form and your check to Friends of the Lakeshore Nature Preserve P.O. 5534 Madison, WI 53705

You will receive a receipt and acknowledgement for your membership or gift from the Friends of the Lakeshore Nature Preserve.

The *Friends* is a 501(c)(3) nonprofit organization.

All contributions are tax deductible to the extent provided by law.

www.FriendsLakeshorePreserve.com