

MEMBERSHIP FORM

Member Fir	st & Last Name (or g	gift recipient) _			
Address				City, State, Zip	
Phone o Cell o Home					
Email Addr	ess				
signature				Date:	
	No	ew Membersh	ip Ren	newal Membership*	
Although we the state. P	□ Family \$65 □ Corporate (\$2500) □ Discovery Corps/Explorer (\$250) □ Discovery Corps/Voyageur (\$500 □ Fort Howard Circle/Ambassador (\$1000) □ Fort Howard Circle/Captain (\$2000) onal Donation: gh we have "state park" in our name, Heritage Hill is te. Please consider an additional donation with your name.		00) Heritage Hill is a 5 tion with your men	*IF THIS IS A GIFT: Person giving gift contact information: Name	
☐ Method of		□ \$100	□ \$200	☐ Other \$	
-	uare (please attach re neck (payable to Heri	-	Park)		
For Herita	ge Hill Staff:				
□ Ha	☐ Has been put into Member database				

Donated Membership