MEMBERSHIP FORM

NAME:

ADRESS:

PHONE:

EMAIL:

*Annual membership dues are payable in January of the current year:*

Individual $10 Husband & Wife $20

Family $35 Business $50

In addition to my membership, I wish to donate $

Giving level of $100+, $500+, and 1000+ are publicly recognized on the Donor Plaque. Recognize my donation:

In honor of In memory of In my/our name(s)

*Print name on line*

Make checks payable to Magnolia Township Preservation Association (MTPA)

*Per our 501(c)3 status, contributions are tax deductible as allowed by law.*

Cut off and keep as receipt for tax purposes.

Date:

Contributed to Magnolia Township Preservation Association (MTPA)

$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dues

$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_donation