

ARNHA MEMBERSHIP APPLICATION

(Please print and complete this form; mail it to the address below.)

Name _____

Organization _____

Address _____

City _____ State _____ Zip _____

Home telephone _____ Business telephone _____

E-mail Address _____

Check here: Yes, I will help with special events and programs a few hours each year.

Gift Membership:

If this is a gift, please complete the following:

For: Name _____

Address _____

City _____ State _____ Zip _____

E-mail address _____ Telephone _____

Choose Type of Membership*

Student \$15

Senior (60+) \$20

Individual \$30

Senior Family (60+) \$35

Family \$40

Contributor \$100

Sponsor \$250

Sustainer \$500

Patron \$1,000

Benefactor \$5,000 +

*Review Member Benefits: www.arnha.org , Membership Page

Payment Information:

Please make check payable to **ARNHA** and send it with this membership application to:

**American River Natural History Association
P.O. Box 241
Carmichael CA 95609-0241**

ARNHA is a volunteer-driven organization with no paid staff, so we keep membership fees low. Please join at the highest level you can—your generosity will help support our ongoing nature education programs.

ARNHA is qualified as a tax-exempt organization under section 501c3 of the Internal Revenue Code..

Thank you for joining us! Your support is appreciated.

