

The E. L. Rose Conservancy of Susquehanna County

Membership Form



Date: _____

Name: _____

Address: _____

Phone: _____ E-Mail: _____

Including your email address will allow us to give you timely notices of events & activities.

<u>Name:</u>	<u>Membership Level:</u>

Please make corrections on page 2 if any information is outdated.

Number	Fee per Member	\$ Sub-Total
	Junior @ \$5 =	
	Friend @ \$20 =	
	Supporting @ \$35 =	
	* Voting @ \$60 =	
	* Sustaining @ \$100 =	
	* Benefactor @ \$ 250 =	
	* Patron @ \$500 =	
	* Other Gift =	
	Total =	\$

New Members are welcome at any time of the year; give a gift membership to a friend or a family member. The normal membership renewal cycle is from May 1st. through April 30th. of the following year.

*All memberships of \$60 or more enjoy Conservancy voting rights.

Please make checks payable to: **The E. L. Rose Conservancy.**



Please return this form with your check to:
The E. L. Rose Conservancy
P.O. Box 8
Montrose, PA 18801

Check the website www.elrose.org for news and events.

Thank you for your continued support.

Use the back of this page for any **updates or changes** to Membership information.

Please list each other member separately

Name: _____ Membership Level: _____

Address: _____
(if different from page1)

Phone: _____ E-Mail: _____

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(if different from page1)

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