



Membership Card

Date: _____

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____ additional phone: _____

Membership level:

_____ \$ 25 Friend

_____ \$500 Benefactor/Silver Level
Corp. Sponsor

_____ \$ 50 Sponsor

_____ \$1,000 Grand Benefactor/ Gold
Level Corp. Sponsor

_____ \$100 Patron

_____ \$1,500 Platinum Level Corp.
Sponsor

_____ \$250 Grand Patron

_____ \$ other amount

_____ Yes, contact me about volunteering _____ No, but thanks for asking.

Please mail membership to P.O. Box 537, Fitzgerald, GA 31750