



## Membership Renewal Form

YES! I would like to renew my Mass Audubon membership at the level checked below!

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Individual - \$50 | <input type="checkbox"/> Contributor - \$100 | <input type="checkbox"/> Steward - \$750              |
| <input type="checkbox"/> Family - \$70     | <input type="checkbox"/> Protector - \$150   | <input type="checkbox"/> Guardian - \$1,000           |
| <input type="checkbox"/> Under 30 - \$25   | <input type="checkbox"/> Sponsor - \$250     | <input type="checkbox"/> President's Circle - \$1,500 |
| <input type="checkbox"/> Explorer - \$85   | <input type="checkbox"/> Patron - \$500      | <input type="checkbox"/> Founder's Circle - \$2,500   |

Please send my **Mass Audubon Grocery Bag**  
(available at Explorer or above)

Member Name #1:

M \_\_\_\_\_

Member Name #2:

*(applicable at the Family level and above)*

M \_\_\_\_\_

Street \_\_\_\_\_ Apt # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

- Enclosed is my check made payable to Mass Audubon
- Please charge my credit card: Visa, MasterCard, or Discover  
Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Signature: \_\_\_\_\_ CVV: \_\_\_\_\_
- My employer will match this membership contribution  
Name of employer: \_\_\_\_\_

Please mail this form and your tax-deductible contribution to:

**Mass Audubon  
Member Services  
208 South Great Road  
Lincoln, MA 01773**