Membership Form

You can renew your membership at USBGFriends.org/Join or by returning this form with a check.

Please select your m	embership level:			
□ INDIVIDUAL - \$75	□ FAMILY - \$150	□ SUPPORTER -\$300	□ PATRON - \$500	□ SUSTAINER - \$1,000
Your Information				
PREFERRED SALUTATION	DN FIRST I	NAME	LAST NAME	
STREET				
CITY		STATE	ZIP	
PHONE		EMAIL		
Gift Membership				
□ INDIVIDUAL - \$75	□ FAMILY - \$150	□ SUPPORTER -\$300	□ PATRON - \$500	□ SUSTAINER - \$1,000
GIFT RECIPIENTS NAM	E			
STREET				
CITY		STATE	ZIP	
PHONE		EMAIL		
Summary of Your Contribution				
\$ MEMBERSHIP	\$	_ GIFT MEMBERSHIP		
\$ ADDITIONAL D	ONATION \$	_ TOTAL ENCLOSED		

Mail form to: Friends of the U.S. Botanic Garden

PO Box 23796 Washington D.C., 20026