



Membership Form

SQUAM LAKES NATURAL SCIENCE CENTER

PO Box 173 Holderness, NH 03245

Please provide the following contact information:

Adult 1:

First Name _____ **Last Name:** _____

Adult 2:

First Name _____ **Last Name:** _____

Permanent Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Mobile 1: _____ Mobile 2: _____

Email 1*: _____

Email 2: _____

*As a member, you will automatically receive the quarterly *Tracks & Trails* newsletter and renewal notices by email. Please let us know if you would prefer to receive a hard copy of the newsletter below.

_____ Please send the quarterly *Tracks & Trails* newsletter by mail.

Seasonal Mailing Address: _____

City: _____ State: _____ Zip: _____

Seasonal Phone: _____

Seasonal Mailing Dates: From ____ / ____ / ____ to ____ / ____ / ____

Please select the membership category you wish to purchase. We accept MasterCard, Visa, American Express, or Discover credit cards and personal checks.

- | | |
|--------------------------|-------------------------|
| _____ \$60 One-Person | _____ \$400 Wetlands |
| _____ \$90 Two-Person | _____ \$600 Field |
| _____ \$135 Four-Person | _____ \$850 Forest |
| _____ \$175 Six-Person | _____ \$1,200 Mt. Fayal |
| _____ \$250 Eight-Person | |

_____ My Check is enclosed, payable to SLNSC (address below)

Please charge my: _____ MasterCard _____ Visa _____ Am Exp _____ Discover

No. _____ Exp. Date _____ CID _____

Cardholder Signature: _____

Printed Name on Card: _____

_____ I have named Squam Lakes Natural Science Center in my estate plans.

_____ I want to volunteer. Please contact me.

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Squam Lakes Natural Science Center is a 501(c) (3) non-profit organization - Federal Tax ID #: 02-0271824.