

Skagit Audubon Society Membership Form

Membership: ____ \$20/one year **OR** ____ \$40/two years * * * ____ New **OR** ____ Renewal

Additionally, I wish to donate \$_____ to Skagit Audubon Society, a 501(c)(3) nonprofit organization. Please designate my donation to: ____ General ____ Education ____ Scholarship Fund.

Payment: (1) Pay online with a credit card or PayPal (see skagitaudubon.org for details) **OR** (2) Mail this form & your check to: Skagit Audubon Society, P.O. Box 1101, Mt. Vernon WA 98273-1101

Name: _____

Address: _____

City/State/: _____

ZIP: _____ Phone: _____

Email: _____

By providing your email address and those of any household members, you/they consent to SAS's use of electronic transmission, such as email and website postings, for notices about SAS business. You may revoke this consent at any time on written request to the Secretary of SAS.

Membership includes those members of your household whose names & emails you provide to us:

Name: _____ Email: _____

(If you have more than one additional member of your household who wishes to become a member of SAS, please provide their name(s) and email address(es) to membership@skagitaudubon.org)

I want to be involved in (check all that apply): Education ____ Conservation ____ Field Trips ____ Hiking ____ Other ____

(To join National Audubon Society, a separate membership, please visit: www.audubon.org)