



# MEMBERSHIP/DONOR FORM

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_

DATE \_\_\_\_\_ NEW \_\_\_ RENEWAL \_\_\_ (Check one)

- Individual membership \$ 20 annually
- Family membership \$ 30 annually
- Sponsor membership \$ 50 annually
- Benefactor membership \$ 75 annually
- Patron or Corporate membership \$100 annually
- Life \$500

DUES \$ \_\_\_\_\_

ADDITIONAL CONTRIBUTION \$ \_\_\_\_\_

TOTAL ENCLOSED \$ \_\_\_\_\_

## VOLUNTEER INTERESTS

My area of interest/expertise is: \_\_\_\_\_

## CONTRIBUTION ONLY

Enclosed is a contribution of \$ \_\_\_\_\_

Contributions are tax-deductible to the extent allowable by law

Please make checks payable to: **Desert Tortoise Preserve Committee** and mail to:

Treasurer  
 DESERT TORTOISE PRESERVE COMMITTEE, INC  
 4067 Mission Inn Avenue  
 Riverside, CA 92501