

CBG Membership Form

New **Renewal**

Name _____ Phone () _____

Address _____ Cell () _____

City _____ State _____ Zip _____

Email _____

.....
 Student \$20 Senior \$20

Individual \$25 Family \$40

Patron \$50 Business \$100

Supporter \$150 Sponsor \$250

Sustaining \$500 Benefactor \$1000

Renew online today at www.clovisbotanicalgarden.org

or complete information below and mail form w/payment to:

Clovis Botanical Garden

1865 Herndon Ste. K, Box 330, Clovis, CA 93611

Cash \$ _____ Date _____

Check # _____ \$ _____ Date _____

(Make checks payable to: Clovis Botanical Garden)

Card # _____ Exp. Date _____ csv _____

Signature _____ Date _____

**Additional gift \$ _____ memo _____

Office Use only

Member Since - _____

Membership # - _____

Expiration date - _____

phone - 559-298-3091

email - admin@clovisbotanicalgarden.org

Thank you for supporting the Clovis Botanical Garden