

*Yes, I/we would like to become a member/renew my membership.*

Individual: \$40 \_\_\_\_\_

Student: \$25 \_\_\_\_\_

Family: \$75 \_\_\_\_\_

Business: \$250 \_\_\_\_\_

Other Amount: \$ \_\_\_\_\_

I would like to contribute an additional gift to support CCAH's programs:

Program: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Enclosed is my check in the amount of: \$ \_\_\_\_\_

Please charge my gift to : Visa: \_\_\_\_\_ Mastercard: \_\_\_\_\_

Account Number: \_\_\_\_\_

Signature: \_\_\_\_\_

Name (as is appears on card): \_\_\_\_\_

Name (as I/we wish to be acknowledged): \_\_\_\_\_

Business: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

We do not share our e-mail addresses, Having your e-mail address will help us send you more timely announcements, will reduce our costs and help us to save our precious trees.)

I would like to know more about contributing the CCAH Endowment. \_\_\_\_\_

I would like to volunteer for CCAH. \_\_\_\_\_