



Hartford Audubon Society Member Application Form

Please check off the level of membership you want and then write in the amount:

Level:		Amount:
_____	Regular \$15.00	\$ _____
_____	Family \$23.00	\$ _____
_____	Life \$250.00	\$ _____
_____	Senior (over 65) \$8.00	\$ _____
_____	Senior couple (over 65) \$13.00	\$ _____
_____	I wish to make an extra donation to HAS	\$ _____
	Total:	\$ _____

NOTE: Please make your check payable to The Hartford Audubon Society, Inc. and mail your check and application to: The Hartford Audubon Society, PO Box 270207, West Hartford, CT 06127-0207

Please complete following information – please print:

Name: _____
(As it should appear in the program booklet)

Address: (please include Street/City/State/Zip):

Phone Number: _____ E-Mail Address: _____
