

Please include me as a member of the Highline Botanical Garden Foundation.

New Member     Renewal

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone (day) \_\_\_\_\_ (evening) \_\_\_\_\_

E-mail \_\_\_\_\_

Make checks payable to: Highline Botanical Garden Foundation (HBGF) and send to PO Box 69384, SeaTac, WA 98168.

## Thank you for your support!

*The Highline Botanical Garden Foundation is a 501(c)(3) nonprofit organization. Dues and contributions are fully tax deductible to the extent provided by law. Matching funds may be available from your employer. Names are not sold or shared for any purpose.*

- |                          |                      |         |
|--------------------------|----------------------|---------|
| <input type="checkbox"/> | Individual           | \$ 25   |
| <input type="checkbox"/> | Family               | \$ 40   |
| <input type="checkbox"/> | Steward              | \$ 50   |
| <input type="checkbox"/> | Business/Corporation | \$ 200  |
| <input type="checkbox"/> | Benefactor           | \$ 500+ |

I wish to contribute \$\_\_\_\_\_ to support the Garden.

I wish to volunteer:

- Fundraising
- Plants Sales
- Working in the Garden