



ANNUAL MEMBERSHIP APPLICATION

The mission of the Florida Scrub-Jay Consortium is to preserve the Florida Scrub-Jay and its habitat. Your support is very important to us and vital for continuing our mission. Thank you!

Date _____

Name _____

Business or Organization _____

Address _____

Phone _____

Email Address _____

I am interested in becoming a volunteer!

Membership Levels:

Students: _____ \$10.00 Individual: _____ \$25.00 Family: _____ \$40.00 Sponsor: _____ \$100.00 Corporate: _____ \$250.00

Please print and mail this form with your check made payable to:

The Florida Scrub-Jay Consortium
P.O. Box 120777
Clermont, Florida 34712

Or

Credit Card: MasterCard _____ Visa _____

Card Number _____

Expiration Date _____

Cardholder's Name _____

Security Code _____

(3-digit number on back of card in reverse italics)

Visit our website at www.scrubjaytrail.org for all the latest information and updates on the Florida Scrub-Jay Trail.

Thank you again for your support.

The Florida Scrub-Jay Consortium is a 501 (c)(3) non-profit organization, and your donation may be tax deductible as permissible by law.