

Palma Sola Botanical Park Foundation Individual/Family Membership Form

Yes, sign me up!

I wish to join the Palma Sola Botanical Park Foundation by making the contribution below.

- Student**\$10
- Friend**\$25
- Family**\$50
- Sustaining**\$100
- Patron**\$500
- Benefactor**\$1000

Foundation members
are vital to
the park's success

**Make your check payable
to and mail to:**

*Palma Sola Botanical Park
P.O. Box 14214
Bradenton, Florida 34280-4214*

Contact Name (Please Print):

Family Members' Names

Address:

City:

State:

ZIP:

Telephone (home):

Telephone (work):

Email

Fax:

Total Amount of Donation

\$ _____

I am enclosing

\$ _____

Does your company have a matching gift program? Yes No If yes, please enclose your matching gift form. Company:

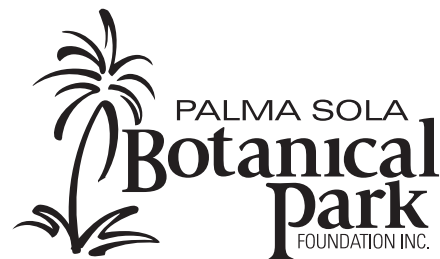
Today's Date

I would like my gift to remain anonymous.

Can we call you to volunteer at the Park? Yes No

If you can volunteer at the park, describe how you would like to help here:

- Planting, weeding, cleanup
- Mailings
- Office work (typing, copying, filing)
- Working at special events like the annual Garden Party or Plant Sale
- I am interested in a position on the park's Board of Directors
- Other, describe below:



941.761.2866 tel 941.761.7355 fax

palmasolabp@aol.com

9800 17th Avenue North West, Bradenton, Florida 34209

Mail checks to: P.O. Box 14214, Bradenton, FL 34280-4214