



FRIENDS of OKEEHZEELEE NATURE CENTER  
**MEMBERSHIP FORM**

Date: \_\_\_\_\_

Membership Type:  **New membership**  **Renewal**

Membership Levels	Annual Price	Lifetime Price
<b>Student</b> (w/student ID)	<input type="checkbox"/> \$10	N/A
<b>Senior (65+)</b>	<input type="checkbox"/> \$15	<input type="checkbox"/> \$79
<b>Individual</b>	<input type="checkbox"/> \$20	<input type="checkbox"/> \$99
<b>Couple</b>	<input type="checkbox"/> \$35	<input type="checkbox"/> \$199
<b>Family</b>	<input type="checkbox"/> \$75	<input type="checkbox"/> \$299

**CONTACT INFORMATION:**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Is this a Gift membership** (please circle)? Yes No

Member / Recipient's name: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Gift Recipient's Phone: \_\_\_\_\_

Gift Recipient's Email: \_\_\_\_\_

**Send the membership packet to** (please circle): You Recipient

Name on Card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Security Code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

**RETURN VIA MAIL or IN PERSON**  
Okeehzeelee Nature Center  
ATTN: FONC  
7715 Forest Hill Boulevard  
West Palm Beach, FL 33413

**-OR-**

Please make checks payable to: **Friends of Okeehzeelee Nature Center**

**FOR OFFICE USE ONLY**

Payment Type:  Cash \$ \_\_\_\_\_  Check # \_\_\_\_\_  Credit Card \$ \_\_\_\_\_ Membership # \_\_\_\_\_