



CORPORATE MEMBERSHIP APPLICATION

Company Name: _____

(Please print name exactly as you wish it to appear in all print publications)

Contact Name: _____

Contact Position/Title: _____

Address: _____ Suite: _____

City: _____ State: _____ Zip: _____

Contact Email: _____

Company Email: _____

Please include email address to receive monthly updates & announcements on Arboretum events.

Phone: _____ Fax: _____

CORPORATE MEMBERSHIP LEVELS

- ☐ MAGNOLIA SLOPE \$250
- ☐ ENGLISH PARK \$500
- ☐ AZALEA MEADOW \$1,000

Company Name as it appears above will be printed on each membership card unless specified below otherwise.

Membership Card One: _____

Membership Card Two: _____

PAYMENT INFORMATION

Please make checks payable to The Morris Arboretum.

Membership Dues Payment \$ _____

Form of payment: ☐ Check ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

Name on Card: *(please print)* _____

Signature: _____

Credit Card Number: _____ Expiration Date: ____ / ____
(month/year)

For corporate credit cards, please include the three-digit security code *(on reverse side of card)*: ____