

LOUISVILLE NATURE CENTER

MEMBERSHIP FORM

Yes, I want to become a member of Louisville Nature Center and support the mission to provide nature education and encourage stewardship in an urban forest. I also will enjoy free and discounted programs offered year-round by LNC.

Name _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone _____

Select your level of support and mail this form along with your check made payable to Louisville Nature Center to:

LNC, 3745 Illinois Avenue, Louisville, KY 40213.

<input type="checkbox"/>	Family	\$45
<input type="checkbox"/>	Steward	\$100
<input type="checkbox"/>	Individual	\$30
<input type="checkbox"/>	Senior	\$25
<input type="checkbox"/>	Teacher	\$20
<input type="checkbox"/>	Student	\$20
<input type="checkbox"/>	Business (Basic)	\$250
<input type="checkbox"/>	Business (Premium)	\$500

Thank you very much for your support!

We look forward to your next visit to LNC!