

# Capital District Humanist Society

PO Box 11209  
Loudonville NY 12211-0209

## Membership Form

I'm a new member

I'm renewing

Name(s) \_\_\_\_\_

Phone(s) \_\_\_\_\_

Street / Apt / PO Box Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

E Mail(s) \_\_\_\_\_

*All this information will be included in our Member Directory, which is distributed to members only, unless you request otherwise by checking here:*

### Membership Levels

### Annual Payment

- |  |   |
|--|---|
| <input type="checkbox"/> Individual Membership | \$ 50                                   |
| <input type="checkbox"/> Family Membership     | \$ 80                                   |
| <input type="checkbox"/> Sustaining Membership | \$100                                   |
| <input type="checkbox"/> Patron                | \$150                                   |
| <input type="checkbox"/> Lifetime Member       | One time contribution of \$1000 or more |
| <input type="checkbox"/> Additional donation   | \$ _____                                |

**Amount Enclosed \$ \_\_\_\_\_**

*Please make check payable to CDHS and mail to the address above.*

How did you learn about CDHS? \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Thank you for your support.*