



Hazen's Notch Association

Membership Form

MEMBERSHIP

Name _____

Address _____

Town _____

State/Prov. _____ Postal Code _____

Tel _____

Email _____

Please make checks payable to: Hazen's Notch Association and mail to: HNA, P.O. Box 478, Montgomery Center, VT 05471

Choose your membership Level

- ◇ Individual \$20
- ◇ Family \$25
- ◇ Organization \$30
- ◇ Donor \$50
- ◇ Supporter \$75
- ◇ Patron \$125
- ◇ Steward \$250
- ◇ Conserver \$500

Membership Dues _____
Additional Donation _____

Please check (✓) applicable designated fund below:

Campership Fund _____
Trails Fund _____
Stewardship Fund _____

Total Amount : _____

MEMBERSHIP