

Give the gift of membership, and your friend or loved one will be a partner in our mission
to inspire appreciation and stewardship of our environment.

Members receive the following benefits:

- ◆ A copy of *Naturally Speaking* – our quarterly newsletter. ◆ Free admission to select programs.
- ◆ Discounts on Sunday brunches, dinners, classes, special events, and programs.
- ◆ Reciprocal benefits at over 140 nature centers.
- ◆ 10% off gift shop purchases, excluding art pieces. ◆ Free snowshoe rental.

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|-------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------------------|
| <input type="checkbox"/> Student \$25 (with valid student ID) | <input type="checkbox"/> NEW | <input type="checkbox"/> RENEWAL |
| <input type="checkbox"/> Senior Individual \$25 (ages 62 and older) | | |
| <input type="checkbox"/> Senior Couple \$30 (ages 62 and older) | | |
| <input type="checkbox"/> Individual \$30 | | |
| <input type="checkbox"/> Family \$35 (Two designated adults and their children ages 18 and under) | | |
| <input type="checkbox"/> Grandparent \$35 (Two designated adults and their grandchildren ages 18 and under) | | |
| <input type="checkbox"/> *Supporting \$100 – \$249 (Two designated adults and their children/grandchildren ages 18 and under) | | |
| <input type="checkbox"/> *Sustaining \$250 and up (Two designated adults and their children/grandchildren ages 18 and under) | | |

***Receives recognition in the Visitor Center and two brunch passes (Fair market value \$32).**

The Willard G. Pierce and Jessie M. Pierce Foundation, which operates Pierce Cedar Creek Institute is a 501 (C) (3) non-profit, private operating foundation.
Your membership and donation are tax-deductible contributions to the fullest extent provided by law.

Gift Membership purchased for:

Prefix: _____ Name (s): _____ Date: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Purchased by:

Prefix: _____ Name (s): _____ Date: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Membership amount: \$ _____

I would like to further extend my support. Please accept my donation: \$ _____

Payment Total: \$ _____

Form of Payment: Check # _____ Cash Credit Card

Credit Card # _____ Exp. Date: _____

Please send letter and membership cards to: Purchaser Recipient