

GIFT MEMBERSHIP FORM



STEP 1 - Print and fill out this form.

Your Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

Email: _____

Recipient's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

Email: _____

Is the recipient... A new or A renewing member?

Individual Gift Membership Options:

Individual Membership One Year (\$30) Two Year (\$60)

Lifetime Membership \$500 — Single payment of \$500
 4 quarterly installments of \$125
 12 monthly payments of \$41.67

STEP 2 - Payment Options (select one):

Check Enclosed (Please make checks payable to: *BlueRibbon Coalition*)

Credit Card - Card Number _____

Expiration _____

CVV Code _____



Address, City & State (from credit card billing statement, if different from address above)

**STEP 3 - Mail This Form To: Sharetrails.Org/BlueRibbon Coalition
4555 Burley Drive, Suite A
Pocatello, ID 83202**

Thank you for your support of the
Sharetrails.Org/BlueRibbon Coalition's efforts to
"Preserve Our Natural Resources **FOR** The Public Instead of **FROM** The Public."