

Friends of the Constitution Trail

Membership Form

Name _____

Address _____

City, State, Zip Code _____

Email Address _____

Phone Number _____

Please indicate if this:

A new membership or Renewal of an existing membership

Membership Rates

Check One	Dues
<input type="checkbox"/> Individual	\$15
<input type="checkbox"/> Family	\$25
<input type="checkbox"/> Trail Backer	\$50
<input type="checkbox"/> Sponsor	\$150
<input type="checkbox"/> Patron	\$500
<input type="checkbox"/> Lifetime	\$1000

Get Involved with the Friends - Volunteer Opportunities

Growth Committee

Beautification Committee

Membership Committee

Publicity & Newsletter Committee

Fundraising Committee

Board Member

Send this form along with your donation, to Friends of the Constitution Trail, PO Box 525, Bloomington, Illinois 61702-0525.