

NATIONAL AUDUBON SOCIETY LOCAL CHAPTER - THE AUDUBON SOCIETY OF CENTRAL MARYLAND

MEMBERSHIP APPLICATION: *Please enroll me as a member of the National Audubon Society and my local chapter. Please send Audubon magazine and my membership card to this address:*

Name _____ Address _____ City/State/Zip _____

GIFT MEMBERSHIP: *Please enter a one-year gift membership in the National Audubon Society and send a gift membership announcement to:*

Name _____ Address _____ City/State/Zip _____

(From) _____ Address _____ City/State/Zip _____

MEMBERSHIP CATEGORY PREFERRED: INTRODUCTORY \$20 FAMILY \$38 My check for \$____ is enclosed.

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Make membership checks payable to: Nat'l Audubon Society. Contributions to assist our educational & environmental work should be made payable to: Audubon Society of Central MD . Please mail all checks to: ASCM, P.O. Box 660, Mt. Airy, MD 21771