



Membership Form

Name(s): _____

Company name (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone(s): _____

E-mail address(es): _____

Membership Levels (check one)

Basic Membership \$25 (dues valid through January 1)

Individual Lifetime \$500

Corporate Lifetime \$1000

Monthly sustainer (choose a suggested level or set your own)



Include an additional monthly or one-time contribution to Friends of the Noxubee

\$5/month(\$60/year)

\$10/month (\$120/year)

\$15/month (\$180/year)

\$20/month (\$240/year)

\$25/month(\$300/year)

I'd like to contribute an additional \$ _____

All contributions are tax deductible

Payment Type*

Cash

Check

Credit Card*

PayPal*

*Fee for PayPal or Credit Card - \$1

Fees \$ _____

Total Due \$ _____

Credit card and PayPal payments can be made by visiting our membership website at <https://www.friendsnoxref.org/membership/>. Credit card payments also can be processed at the Refuge Visitor's Center

Cash payment: Drop this form and payment in a marked envelope at the Refuge Visitor's Center

Check payment: Drop this form and check at Refuge Visitor's Center or mail to: *Friends of Noxubee Refuge
ATTN: Membership Chair
13723 Bluff Lake Rd.
Brooksville, MS 39739*

**Thank you for supporting Friends of Noxubee Refuge.
We look forward to your participation in our upcoming events.
FONR is a 501(c) entity**