

Membership

Application



TEATOWN

Name(s) _____
Company/Organization _____
Address _____
City/State/Zip _____
Phone (H) _____ Phone (C) _____
E-mail _____

- Address Change
- Company matching gift form enclosed

The above is a gift membership given by:

Name(s) _____
Company/Organization _____
Address _____
City/State/Zip _____
Phone (H) _____ Phone (C) _____
E-mail _____

Gift notice will be sent to the recipient.

Please mail completed form to:

Teatown Lake Reservation
Attn: Membership
1600 Spring Valley Road
Ossining, NY 10562

Membership

- New
- One Year
- Gift
- Renewal
- Two Years

Levels

- \$40 Student
- \$40 Senior
- \$60 Individual
- \$85 Family
- \$175 Supporting
- \$275 Sponsoring
- \$1,000+ Teatown Lake Circle

Payment

\$ _____ Additional Contribution
\$ _____ Total Enclosed

I have enclosed a check for \$ _____
made payable to Teatown.

I am paying by credit card (circle one)

AMEX Mastercard Visa Discover

I authorize Teatown to charge my credit card for \$ _____

Name on card _____

Expiration date _____ Security code _____

Card Number _____

Signature _____