

# SEA TURTLE PRESERVATION SOCIETY

## Membership Form

### 321-676-1701

**New Member**                   **Renewal**

<input type="checkbox"/> Student Annual ..... \$15 <input type="checkbox"/> Individual Annual ..... \$20 <input type="checkbox"/> Family Annual ..... \$30 <input type="checkbox"/> Contributor Annual ..... \$50	<input type="checkbox"/> Lifetime ..... \$200 <input type="checkbox"/> Endowment ..... \$300 <input type="checkbox"/> Benefactor ..... \$500 <input type="checkbox"/> Donation ..... _____
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Name: \_\_\_\_\_

Last	First	Middle Initial
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Address: \_\_\_\_\_

Street	City	State	Zip
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Home Phone: (\_\_\_\_) \_\_\_\_\_      E-Mail Address: \_\_\_\_\_

Please make your tax-deductible check payable to: **Sea Turtle Preservation Society.**

I am interested in volunteering:     YES     NO

My interests and talents are:

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**Mail to:**  
 Sea Turtle Preservation Society  
 P.O. Box 510988  
 Melbourne Beach, FL 32951-0988