



Preserving our past . . .
protecting our future

PCT MEMBERSHIP AND DONATION



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protecting our future

NAME(S): _____

ADDRESS: _____

CITY/TOWN, STATE ZIP: _____

PHONE: _____

EMAIL: _____

Please check desired membership level and mail this form with your check to:

Pascommuck Conservation Trust
P.O. Box 806
Easthampton, Massachusetts 01027

- Individual: (\$10)
- Family: (\$25)
- Contributor: (\$50)
- Patron: (\$100)
- Corporate: (\$250)
- Sponsor: (\$500)
- Life Member: (\$1000)

Additional tax-deductible donation for:

- Unrestricted Donations: \$ _____
- Monthly Donations: \$ _____
- Conservation Area Stewardship: \$ _____

I WOULD ALSO LIKE TO HELP THE TRUST BY:

<input type="checkbox"/> Serving on Board of Directors	<input type="checkbox"/> Publications (editing/design/photos/writing)
<input type="checkbox"/> Donating items for flea market /tag sales	<input type="checkbox"/> Publicity/media relations
<input type="checkbox"/> Donating prizes for raffles	<input type="checkbox"/> Grant writing/fundraising
<input type="checkbox"/> Event setup/takedown (Fall Festival, etc.)	<input type="checkbox"/> Professional services (accounting, etc.)
<input type="checkbox"/> Event staffing	<input type="checkbox"/> Land conservation (landowner contacts, planning, etc.)
<input type="checkbox"/> Monitoring a Trust area near me	<input type="checkbox"/> Advocacy (letters/emails/phone calls to support conservation)
<input type="checkbox"/> Trails/property construction and maintenance	<input type="checkbox"/> Office work (filing, database, etc.)
<input type="checkbox"/> Preparation of mailings	<input type="checkbox"/> Other: _____