

**MEMBERSHIP APPLICATION
JOIN TODAY**



CHOOSE ONE:

DATE: _____

Personal Membership Gift membership
Gift Membership given by _____

MEMBERSHIP TYPE: New Member Renewing

MEMBERSHIP CATEGORIES:

<input type="checkbox"/> Individual	\$ 40	<input type="checkbox"/> Benefactor	\$ 500
<input type="checkbox"/> Family	\$ 75	<input type="checkbox"/> Community Business	\$ 500
<input type="checkbox"/> Patron	\$ 125	<input type="checkbox"/> President's Club	\$ 1,000
<input type="checkbox"/> Sustaining	\$ 250	<input type="checkbox"/> Research Partner	\$ 5,000
		<input type="checkbox"/> Lifetime Member	\$ 10,000

ADDITIONAL GIFT: \$ _____

TOTAL AMOUNT ENCLOSED: \$ _____

Please make check payable to:

Florida Oceanographic Society

890 NE Ocean Blvd., Stuart, FL 34996

MEMBERSHIP INFORMATION: (Please print clearly)

Last Name: _____

First Name: _____

Spouse Name: _____

Company Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Seasonal Resident:(months) _____

Phone: _____

Community/Condo Name _____

E-mail Address: _____

My company has a matching gift program

I am interested in becoming a Volunteer

Mailing list for Young Friends (ages range 20s-40s)

VISA MC AMEX DISC Exp: _____ Code _____

Card #: _____

Signature: _____

Florida Oceanographic Society is a non-profit organization.
Your Membership, donations and other contributions are tax deductible to the full extent of the law. Memberships in all categories are annual from date of application.

Please print out this form, fill in your information, and mail the form in to become a Member of the Florida Oceanographic Society.

Mail to:

Florida Oceanographic Society
890 NE Ocean Blvd.
Stuart, FL 34996

Date Mailed: _____

If paying by credit card you may:

Fax: 772-225-4725
Attention: Linda
or
Call: 772-225-0505 x-108

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