MEMBERSHIP FORM

Check one: New Member ☐ Renewal ☐

Name _____

Address _____

Town _____State ____Zip_____

Phone Number ( )_____

If you would like to receive our newsletter and information about workshops and special events via email, please include your email:

_____

(We will never sell or loan our email list)

Check One:

Middleborough Resident	**Non-Resident**
_____**$10 Senior**	_____**$15 Senior**
_____**$20 Individual**	_____**$25 Individual**
_____**$25 Family**	_____**$30 Family**
_____**$50 Sustaining**	_____**$50 Sustaining**
_____**$500 Lifetime**	_____**$500 Lifetime**

Please make checks payable to:

Soule Homestead Education Center

46 Soule Street, Middleboro, MA 02346

Thank You!

Memberships are Tax Deductible

____ I enclose an additional $_____ as a contribution to the Soule Homestead Education Center.

____ I would like more information about becoming a volunteer.

Thank you for your support!!!

We look forward to seeing you at the farm.