

MEMBERSHIP APPLICATION

Enclosed is my membership support of:

- _____ Chestnut Leaf - \$5,000
- _____ Gold Leaf - \$1,000
- _____ Silver Leaf - \$500
- _____ Bronze Leaf - \$250
- _____ Green Leaf - \$100
- _____ Regular - \$40
- _____ Student - \$15
- _____ Other \$ _____

Special gift to State Chapter:

\$ _____ (Circle one) AL CT GA IN KY MA MD ME NC/SC NY OH PA TN

\$ _____ TOTAL AMOUNT ENCLOSED

Membership includes a subscription to **The Bark** and **The Journal of The American Chestnut Foundation** and enrollment in the **Pennsylvania State Chapter**. TACF is a 501(c)(3) not-for-profit membership corporation. Donations are tax deductible to the extent allowed by law

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

This is a gift membership from _____

Address _____

Check Enclosed (make payable to The American Chestnut Foundation)

Credit Card VISA MC _ _ _ - _ _ _ - _ _ _ - _ _ _ Exp. Date ___ / ___ / ___

Name on Card _____

Credit Card Billing Address if different from Above:

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

SIGNATURE _____

DATE _____

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