

Friends of Hudson Parks Membership Application – Valid Through December 31, 2024

<u>Level of Member Support</u>		
Individual \$10	Family \$20	Benefactor \$50
_____	_____	_____
Group or Organization Membership \$25 _____		

Membership Total _____		
Additional Contribution _____		
Total _____		

<i>I am interested in becoming a:</i>	
FOHP Officer / Director _____	Park Ambassador _____
<i>I am interested in the following Committees:</i>	
Programming _____	Conservation _____
Education _____	Publicity _____
Membership _____	

Name(s) _____

Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

New member Renewal

Please make checks payable to Friends of Hudson Parks. Send to Friends of Hudson Parks, P.O. Box 941, Hudson, Ohio 44236

