HUMBOLDT BOTANICAL GARDENS FOUNDATION

Membership Application/Renewal Form

___ New Membership
___ Renewal Membership
___ HBGF Gift Membership

How did you hear about HBGF?


Annual Membership Rates

Please Mark Selections with Quantity

_____ Dog* ($20)
_____ Student ($20)
_____ Senior ($25)
_____ Individual ($35)
_____ Family ($50)
_____ Non-Profit Organization ($75)
_____ Patron ($100)
_____ Professional Photographer ($150)
_____ Business/Organization ($250)
_____ Groundskeeper ($500)
_____ Lifetime ($1,000)
_____ Benefactor ($5,000)

*owner must also be a current member

Fill the form out, and send it along with payment information to:
Humboldt Botanical Gardens Foundation
P.O. Box 6117 Eureka, CA 95502-6117
Phone: (707) 442-5139

Payment Information

___Visa  ___MasterCard  ___Check #  ___Cash
Card Holder Name: ____________________________________________
Card Number: ________________________________
Expiration Date: ________ CVV# (3 digit on back) ________ Billing zip code ________
Signature: __________________________________________________________________

Membership: $ _________________________________
Gift Membership: $ _________________________________
Donation: $ _________________________________
Total: $ _________________________________

*Memorial Donation: $ _________________________________ For: ______________________________

Please send Acknowledgment to: __________________________________________________________

*Donations and Memorials go directly toward creation of the Garden.

The Humboldt Botanical Gardens Foundation is a not for profit 501(c)(3) public benefit corporation, Tax ID# 68-0243631. Contributions are tax deductible to the extent allowed by law.