



APPLICATION FOR MEMBERSHIP

Name _____ Date _____

Email _____ Phone _____





Address _____

City _____ State _____ Zip _____

Membership / Donation: Enclosed \$ _____ PayPal \$ _____

Any amount you can afford to give at this time is appreciated!

We have designated categories of:

-  GOLD MEMBERSHIP (2 VOTES) - \$100 / YEAR
-  FAMILY MEMBERSHIP (2 VOTES) - \$40 / YEAR
-  SINGLE MEMBERSHIP (1 VOTE) - \$25 / YEAR
-  YOUTH 12-18, SENIORS 62 AND OLDER (1 VOTE) - \$15 / YEAR

Please make checks payable to: **Petersurg Humane Association**

Send to: **PO Box 1417, Petersburg, AK 99833**

CAN YOU HELP?

**Thank You
For Your Support!**



- Foster A Dog
- Foster A Cat
- Write Grants
- Excercise Dogs
- Create Or Read A Radio Spot
- Plan Fundraiser
- Work At Fundraiser
- Staff Booth At A Festival
- Donate Prizes
- Make Flyers
- Post Flyers
- Other (explain)