



## THE 300 COMMITTEE LAND TRUST GIFT MEMBERSHIP FORM

**Your name(s):** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### Gift Membership Recipient

Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### Gift Membership Amount (check applicable or write other amount)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> \$35 Individual  | <input type="checkbox"/> \$300 Caretaker  | <input type="checkbox"/> \$3,000 Visionary   |
| <input type="checkbox"/> \$50 Family      | <input type="checkbox"/> \$500 Benefactor | <input type="checkbox"/> \$5,000 Conservator |
| <input type="checkbox"/> \$100 Sustaining | <input type="checkbox"/> \$1,000 Guardian | <input type="checkbox"/> Other: _____        |

### Additional Gift Information (is there anything else you would like us to know about this gift?)

### Payment

Please mail payment to:

The 300 Committee Land Trust  
13 Thomas B. Landers Rd  
East Falmouth, MA 02536