



**MID
KLAMATH
WATERSHED
COUNCIL**

MEMBERSHIP LEVEL

(PLEASE CHECK ONE)

- \$25 Spring
- \$50 Creek
- \$100 River
- \$250 Confluence
- \$500 Estuary
- \$1500 Ocean (Lifetime Member)
- Other \$ _____

Thank you!

I WANT TO SUPPORT MKWC!

NAME: _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

E-MAIL: _____

PHONE (OPTIONAL): _____

\$50 and up check one: Please send me a Notecard Pack,
 T-Shirt (*Shirt Size* _____), No Gift.

All members will receive an annual newsletter and annual report.

Check any that apply: I want to be anonymous, List me as a member, but don't specify my member level, Please add me to your current events mailing list, Please send a **tax deductible** receipt, Other _____

IN ADDITION TO MY MEMBERSHIP,
I WOULD LIKE TO DONATE

\$ _____ TO:

Programs: Fire & Fuels Fisheries Native
Plants Invasive Weed Management Panamnik
Building Project Watershed Education Wildlife

Donations of \$250 or more are eligible for a one-day tour of current on-the-ground projects.

Please send me information on the restoration tour dates.

Send your check to:
MKWC
PO Box 409
Orleans, CA 95556