

MEMBERSHIP APPLICATION

To Become a Supporting Member...

Please complete this form and mail it with
your check to:

Placer Hills Education Foundation
PO Box 757
Meadow Vista, CA 95722

Or subscribe by credit card on line at:
www.placerhillseducationfoundation.org



Name _____

Mailing Address _____

City/State/Zip _____

Telephone (_____) _____ - _____

Email _____

Please select your membership level:

- Gold \$25
- Silver \$50
- Platinum \$100

Amount enclosed \$ _____

Payment Method:

- Check enclosed
 - Credit Card (circle one) Visa MasterCard Discover American Express
- Card Number _____
Expiration Date _____

Interested in helping PHEF support children in our community in other ways?

- Yes, please contact me
- No thanks

- I'd prefer not to have my name on PHEF's Member Wall