

Join Friends of Tamarac today!

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____

Email: _____

Date: _____

_____ \$25 Family/Individual

_____ \$100 Patron

_____ \$250 Steward

_____ \$500 Life Membership

\$_____ Additional Donation

\$_____ Total Enclosed

This is a gift membership for:

My gift of \$___ is in memory/honor of:

Address for memorial or gift membership notification:

- _____
☐ Please include me on your events email list
☐ Please send me information about volunteering.

Please send checks payable to:

Friends of Tamarac

35704 County Hwy 26

Rochert, MN 56578

For more information please contact:

email: info@tamaracfriends.org

www.tamaracfriends.org

218-844-1767