



## MEMBERSHIP & DONATION FORM

Contact Name:	_____
Organization:	_____
Address:	_____
City/State/Zip:	_____
Phone:	_____
Email:	_____

### Sustaining Member:

- |   | <u>Amount</u>    |
|---|------------------|
| <input type="checkbox"/> Yes! I/We want to be annual sustaining member of SRCEH | \$1,000/annually |
| <input type="checkbox"/> Monthly sustainer                                      | \$ _____/month   |
| <input type="checkbox"/> Quarterly sustainer                                    | \$ _____/quarter |

### Organizational Member:

- |  | <u>Annual membership</u> |
|--|--------------------------|
| <input type="checkbox"/> Nonprofit, small: budget less than \$250,000              | \$100                    |
| <input type="checkbox"/> Nonprofit, medium: budget between \$250,000 – one million | \$250                    |
| <input type="checkbox"/> Nonprofit, large: budget greater than one million         | \$500                    |

### Individual member:

- |   |            |
|---|------------|
| <input type="checkbox"/> Homeless, very low-income, student | \$0 - \$10 |
| <input type="checkbox"/> Individual                         | \$50       |

### Donation:

For those who wish to give an additional gift; or those who do not wish to become a member, but wish to make a donation:

- Donation; additional gift: \$ \_\_\_\_\_

Total due: \$ \_\_\_\_\_

### Payment Options:

- Check enclosed: please make out to SRCEH; address below
- Credit card on SRCEH's secure website [paypal]: <https://www.srceh.org/donate>
- Please send me an invoice

*All donations tax-deductible: SRCEH's EIN: 46-3175193*

1026 Florin Road, #349, Sacramento, CA 95831  
916-889-4367 [www.srceh.org](http://www.srceh.org)