## **Humane Society of McDonough County - Membership Form**

Please mail this form along with check or money order to: Humane Society of McDonough County, P.O. Box 7, Macomb, IL 61455

N/	L 1	r c		
Mem	per .	шю	meu	Oп

Yes

Other

No

Wiember imormation						
First Name	Last N	Last Name				
Street Address						
City		State Additional Phone Number		Zip Code E-mail		
Primary Phone Number	Additional Phone					
Select Your Membership						
Type of membership	New Ren	new Gift				
Membership Choices	Sustaining (\$100) Co Family (\$35) In		Contributing (\$3 Individual (\$25)	upporting (\$500) ontributing (\$50) ndividual (\$25) unior (under 18) or Pet (\$5)		
Business Memberships	Defender (\$500)	Guardian	(\$250) Pro	tector (\$100)		
For a family membership, please list all member names						
For a pet membership, please list pet name(s)						
If this is a gift membership, p	lease provide the follo					
Recipient First Name		Recipient Last Name				
Recipient Street Address						
Recipient City	Recipient State		Recipient Zip Code			
Please let the recipient of the Yes No	gift membership kno	w who it came	from?			
Are you willing to help with H	ISMC activities?	Can we co	ontact you by pho	one or e-mail?		
Yes No Other						
Via e-mail, may we notify you of meetings and upcoming events?		•	Are you Interested in attending monthly meetings?			

Yes

Other

No