

Friends of Wind Cave National Park Membership form:

_____ \$20/year Single _____ \$250 Business (annual) _____ \$100 Supporting membership

_____ \$30/year Family _____ \$500 Life membership (single) _____ \$700 Life (couple)

_____ \$1000 - \$5000 "1903 Society" _____ \$5000 + "Legacy Donor" _____ Donation

Total Amount Enclosed: \$ _____

Name _____

Address: _____

City: _____ State: _____ Zip: _____ Phone #: _____

Home Email Address: _____

Complete and mail with check to: Friends of Wind Cave National Park
PO Box 336, Hot Springs, SD 57747 or complete online at: www.friendsofwindcavenp.org