**Southern Virginia Botanical Gardens Membership Application**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Membership Level Desired**

\_\_\_\_$20 Individual \_\_\_\_$25 Family

\_\_\_\_$150 Affiliate \_\_\_\_$250 Bronze

\_\_\_\_$500 Silver \_\_\_\_$1000 Gold

\_\_\_\_Over $1000 Platinum \_\_\_\_ $1 Student

Additional Donation in the amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Send Application to:**

**Southern Virginia Botanical Gardens**

**PO Box 624**

**Halifax, VA 24558**