

**MEMBERSHIP**  
c/o Friends of Clermont  
87 Clermont Avenue  
Germantown, New York 12526

**ON LINE MEMBERSHIP APPLICATION**

**Name(s):** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Tel:** (\_\_\_\_) \_\_\_\_\_

**I / We would like to join the Friends of Clermont at the following membership level:**

- |  |   |
|--|---|
| <input type="checkbox"/> Individual (\$35 )  | <input type="checkbox"/> Benefactor (\$200)           |
| <input type="checkbox"/> Dual/Family (\$50)  | <input type="checkbox"/> Patron (\$500)               |
| <input type="checkbox"/> Contributor (\$100) | <input type="checkbox"/> Chancellor's Court (\$1,000) |

**CREDIT CARDS ACCEPTED:** *(circle one)*



**Card Number:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_

**CVC2 Number:** \_\_\_\_\_ *(3 Digit Security Code)*

**Signature:** \_\_\_\_\_

**Tel:** (\_\_\_\_) \_\_\_\_\_

Please make your tax-deductible check payable to **Friends of Clermont**