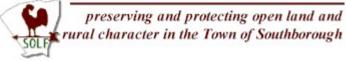
SOUTHBOROUGH OPEN LAND FOUNDATION



Please print and return to: SOLF Treasurer Post Office Box 345 Southborough, MA 01772

Membership Form

Name	
Address (If New Member or if you have moved)	
Telephone	
Email	

Membership Levels:

[]	\$25	Individual
[]	\$50	Family
[]	\$100	Supporting
[]	\$250	Stewards
[]	\$500	Sponsor
[]	\$1000	Benefactor

Amount of Check Enclosed: \$____

SOLF's annual membership now coincides with the calendar year. If you prefer to donate at the end of the year, that's fine.

We will remember to send a reminder!

INTERESTS:

I would like to assist with projects I would like to assist with mailings I would consider serving as a Trustee

