

Nevada Lands Council Membership Form



MEMBER INFORMATION

Name					
Address:					
City:		State:		Zip:	
Phone:			Mobile:		
Email:					

SPONSORSHIP INFORMATION

YEAR 20__	Supporter	Advocate	Partner	Champion
Individual	<input type="checkbox"/> Free	<input type="checkbox"/> \$50	<input type="checkbox"/> \$250	<input type="checkbox"/> \$1000
Business / Organization		<input type="checkbox"/> \$500	<input type="checkbox"/> \$2500	<input type="checkbox"/> \$10000
Term	Lifetime	1 year	1 year	Lifetime

OTHER INFORMATION

I believe that local voices not only understand the issues that face Nevada's public lands, but also have a vested interest regarding their future health and vitality. Therefore, I am willing to offer my services as a:

- | | | |
|--|---|--|
| <input type="checkbox"/> General Volunteer | <input type="checkbox"/> Membership Coordinator | <input type="checkbox"/> Chapter Organizer |
| <input type="checkbox"/> Fundraiser | <input type="checkbox"/> Social Media Coordinator | <input type="checkbox"/> Graphics Designer |
| <input type="checkbox"/> Movie Editor | <input type="checkbox"/> Other: _____ | |

You can count on me to be a voice for Nevada!

Signature: _____ **Date:** _____