

**ELM CITY PARKS CONSERVANCY
MEMBERSHIP APPLICATION**

New/Renew (Circle one)

Name: _____

Address: _____

City / State / ZIP: _____

Phone: _____

Email: _____

Annual Membership Levels:

Supporter / \$20 - \$34 \$ _____

Donor / \$35 - \$49 \$ _____

Sponsor / \$50 - \$99 \$ _____

Benefactor / \$100 + \$ _____

I would like to be a member and will commit to 10 hours of service per year in lieu of a membership fee.

I am interested in participating in:

_____ park clean-ups and trail clearing

_____ special events

_____ representing ECPC at park events

_____ other (office help, etc.)

ECPC is a not-for-profit 501(c)3 organization and your donations are tax-deductible to the extent allowed by law.

In addition, I would like to add \$ _____ to support the

Friends of _____ Park.

Please make checks payable to

Elm City Parks Conservancy

and mail to

**ECPC
720 Edgewood Avenue
New Haven, Connecticut 06515**

Thank you for your support!