



Great Bay Stewards

Membership Form

Please print this form, complete it, and mail it to:

Great Bay Stewards
Attn: Membership
89 Depot Rd, Greenland, NH 03840

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (_____) _____

E-MAIL*: _____

* We will not share your e-mail address with any other person or entity, for any reason

MEMBERSHIP CATEGORIES

- | | |
|--|--|
| <input type="checkbox"/> STUDENT - \$20 | <input type="checkbox"/> GUARDIAN* - \$150 |
| <input type="checkbox"/> STEWARD/FAMILY - \$35 | <input type="checkbox"/> OTHER - \$_____ |
| <input type="checkbox"/> PROTECTOR - \$75 | |

** New Guardian members may choose one of the following:*

- ___ Please send my free tote bag *OR*
- ___ Please send my free four-piece coaster set *OR*
- ___ Please keep my free gift to help further support the Great Bay Stewards

Please make your check payable to: The Great Bay Stewards