N.A.R.T. ANNUAL CONTRIBUTOR FORM

DATE: _____

❑ New Contributor ❑ Renewing Contributor

❑ Individual Contributor $10.00 Additional Conribution: _____

❑ Corporate Contributor: ❑ Bronze - $50
❑ Silver - $100
❑ Gold - $250

Individual or Corporate Name: _____

Check all that apply: ❑ RRT ❑ CRT ❑ RPSGT ❑ MD

Address:_____

City:_____ State: _____Zip_____

Phone (W):_____

E-mail Address: _____

Method of Payment: ❑ Mastercard ❑ Visa ❑ Discover ❑ Amex ❑ Check ❑ Cash

Name on Card: _____

Card #: _____ Expiration Date: _____

Amount to be Charged: _____

Signature:_____

Mail this completed contribution form with payment to:

NART
22 South Parsonage Street
Rhinebeck, NY12572