

Scenic North Carolina

Scenic North Carolina Individual Memberships Application

Name _____

Address _____

City _____ State _____ Zip _____

Email Address _____

Phone _____

Student: \$15

Seniors: \$15

Family: \$35

Donor: \$50

Friend: \$100

Advocate: \$250

Champion: \$500+

I would like to be a sustaining member and pay \$_____ per month to Scenic North Carolina.

Please email your application to scenicnc@gmail.com or fax to: (919) 680-8342.

Members receive quarterly newsletter and periodic updates about issues pertinent to North Carolina's scenic beauty.

Scenic North Carolina

Scenic North Carolina Corporate/Organization Membership Application

Organization Name _____

Address _____

City _____ State _____ Zip _____

Primary Contact Person _____

Email Address _____

Phone _____

Guardian: \$100

Conservator: \$250

Protector: \$500

Champion: \$1,000

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