



Saint Paul Bird Alliance

Saint Paul Bird Alliance Membership/Donation Form

Please complete this form and mail it with your check to:

Saint Paul Bird Alliance
P.O. Box 7275
Saint Paul, MN 55107

Enclosed is my check made payable to the Saint Paul Bird Alliance (chapter membership requires a minimum of a \$25 annual donation):

\$1,000 \$500 \$250 \$100 \$50 Other \$ _____

Name (as you wish to be acknowledged):

Mr./Mrs./Miss/Ms./Mr.&Mrs. _____

Address _____

City _____ State _____ Zip _____

Phone (day): _____ - _____ - _____

Email: _____

Comments: _____

Memorial and Honor Gifts

This is a gift in memory in honor:

Honoree's name: _____

Would you like us to notify anyone of your gift? If so, please supply their name and address:

Matching Gifts:

Double your donation! Many companies will match your gifts to Saint Paul Bird Alliance (even after you retire). Contact your employer's personnel office for a matching gift form.

Matching gift form enclosed. I will forward my matching gift form later.

Thank you! Your contribution to the Saint Paul Bird Alliance remains in the state to support local programs.