

Support your watershed - Join the Friends of the Black River PLEASE PRINT Enroll me as a member ☐ I would like to give this membership as a gift Name _____ (Card will be sent to recipient) Occasion Address _____ Your name Membership Categories (check one) □ \$1.00 Youth (up to age 18) ___ Jackson County Chapter ☐ \$15.00 Individual □ \$20.00 Family Clark County Chapter □ \$30.00 Business \$50.00 Cornerstone Member Phone _____ Email I would like to give an additional contribution in the amount of \$_____ Return registration form and checks payable to: I'm interested in serving on a committee: Land Preservation and Advocacy Friends of the Black River Fundraising and Membership Recruitment Programming PO Box 475 Black River Falls, WI 54615 Clean ups and Special Events ☐ Landings Please check here __ if you would like to receive a receipt. ☐ I am Interested in becoming a board member