

## APPLICATION FOR GIFT MEMBERSHIP

This is a

New 
Renewal 
Gift Membership

## Give the Gift That Lasts All Year Long! Perfect for birthdays, weddings, anniversaries, or just because!

Date:Gift to: ( Dr. / Mr. / Mrs. / Ms. )		
Dual level or higher – 2nd name:		
Primary Mailing Address		
Phone		Home Cell
Email_		
Gift from:		
YOUR NAME	YOUR PHONE	
YOUR MAILING ADDRESS		
VOLD TIME ADDRESS		

Choose from the foll	owing levels of Membershi	p (good for one	year):
☐ \$90 Dual (admits 2 n ☐ \$120 Family (admits under 18 and six \$5 gi	nits 2 members, a family caregiver,	under 12) ildren	<ul> <li>\$250 Patron (admits 2 members, a family caregiver, 4 children under 18 and six \$5 guests)</li> <li>\$500 Benefactor (admits 2 members, a family caregiver, 4 children under 18 and six \$5 guests)</li> <li>\$1,000 Steward (admits 2 members, a family caregiver, 4 children under 18 and six \$5 guests)</li> </ul>
Method of Paymen	t		
Cash Amount \$	Check Enclosed \$	Check Enclosed \$ (make checks payable to Selby Gardens), or	
Credit Card #		Exp. Date:	CSC#
Signature of card holder			
Print name as it appears	on your credit card		MARIE SEI RV

Thank you for helping support our beautiful Gardens. Should you have any questions please call our Membership Department at 941-366-5731, ext 231 811 South Palm Avenue, Sarasota, FL 34236-7726 • www.selby.org

Office use



Please note: member benefits are subject to change.