



## Membership Application

Please Check One

- |  |       |
|--|-------|
| <input type="checkbox"/> Junior (under 18) or Senior (over 64) | \$25  |
| <input type="checkbox"/> Individual                            | \$35  |
| <input type="checkbox"/> Family                                | \$50  |
| <input type="checkbox"/> Non-Profit Organization               | \$100 |
| <input type="checkbox"/> Corporate                             | \$200 |
| <input type="checkbox"/> Additional Donation                   | _____ |

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

email \_\_\_\_\_

Please send us your email address so that we can better keep you up to date on litigation and other current PEDF actions. Your address will not be shared.

*PEDF is a 501(c)(3), and your contribution is deductible to the fullest extent allowed by law.*

Please make check payable and mail to:

**PEDF  
P.O. Box 371  
Camp Hill, PA 17001-0371**

**Thank you for your membership!**