



## Friends of the James River Park SUPPORT FORM

Please complete this form and mail it along with your check to: Friends of the James River Park, P.O. Box 4453, Richmond, VA 23220. Please do not send cash.  
ALL CONTRIBUTIONS ARE TAX DEDUCTIBLE.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_ DAYTIME PHONE NUMBER \_\_\_\_\_

### I WANT TO SHOW MY SUPPORT FOR THE FRIENDS OF THE JAMES RIVER PARK BY:

Becoming a Friend or renewing my existing membership (*indicate membership level*):

- James River Eagle – \$500.00+
- Friend of the Falcon – \$250.00
- Full Nest (*household*) – \$50.00
- Blue Heron (*individual*) – \$30.00
- Single Sparrow (*student*) – \$15.00

Giving a Gift Membership to:

RECIPIENT NAME \_\_\_\_\_

RECIPIENT ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

RECIPIENT EMAIL \_\_\_\_\_ DAYTIME PHONE NUMBER \_\_\_\_\_

MEMBERSHIP LEVEL \_\_\_\_\_

Making a one-time gift of \$ \_\_\_\_\_

Making a gift to the Protection and Preservation Fund of \$ \_\_\_\_\_

Remembering someone with a Living Memorial Giving Fund gift of \_\_\_\_\_

Tribute type:  MARK A SPECIAL OCCASION  IN MEMORY OF

YOUR NAME \_\_\_\_\_

YOUR EMAIL \_\_\_\_\_

HONOREE NAME \_\_\_\_\_

HONOREE ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

IF SPECIAL OCCASION (*birthday, anniversary, etc.*) \_\_\_\_\_

HONOREE E-MAIL \_\_\_\_\_

DONATION TOTAL: \_\_\_\_\_

Subscribe to our monthly FoJRP Enews.

How did you hear about us?

\_\_\_\_\_  
\_\_\_\_\_

THANK YOU FOR YOUR SUPPORT!