

Quiet Valley Living Historical Farm Membership Form

Membership Yearly Rates:

- | | |
|--|--|
| <input type="checkbox"/> \$15.00 Student (under the age of 21) | <input type="checkbox"/> \$100.00 Contributing * |
| <input type="checkbox"/> \$25.00 Individual Member | <input type="checkbox"/> \$150.00 Sustaining * |
| <input type="checkbox"/> \$20.00 Senior (62 and older) | <input type="checkbox"/> \$500.00 Donor * |
| <input type="checkbox"/> \$55.00 Family/Grandfamily
(Parents/Guardians & children [under the age of 21]
or Grandparents & their grandchildren [under the age of 21]) | <input type="checkbox"/> \$1000.00 Life |

* Summer Guest Passes: 2 with Contributing Membership, 4 with Sustaining Membership and 6 with Donor Membership

Mr./Mrs./Ms.: _____

Address: _____

City/State: _____ Zip: _____

Phone: _____ E-mail address: _____

Please, list first names of ALL family members, plus CHILDREN'S birth dates (*month, day, year*)

In order for Quiet Valley to fulfill its mission and your needs and interests it will help us to know what you do, what you are willing to do, what you would like to learn and/or participate in.

Crafts: Can do: _____

Want to learn: _____

Will teach: _____

Provide entertainment. I/we can: _____

Food Preparation for Membership Activities

Call me - I'll bake/make something

I'll come to the farm to cook/bake

Will make telephone calls

Volunteer Tour Guide

Spring/Fall Cleanup

Woodcutting

Gift Shop: Setup Sales

Harvest Festival Worker: _____

Farm Animal Frolic

Old Time Christmas

We Home School

Please call me E-mail me for notification of:

Ice Harvest Maple Sugaring

Comments: _____

Return this form, along with your check made payable to **Quiet Valley Living Historical Farm.**

OR Check one: Visa Master Card

Account Number: _____

Expiration: ____/____

Signature: _____

Mail to: **Quiet Valley Living Historical Farm**
347 Quiet Valley Road
Stroudsburg, PA 18360