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Company	Position
Address	
City	StateZip
☐ I would like to receive t	the National Park Foundation monthly e-newsletter, Goparks.
I would like to support the	National Park Foundation at the following level:
□ \$50	□ \$1,000 – Bronze
□ \$100	□ \$2,500 – Silver
□ \$250	□ \$5,000 – Gold
Other amount \$	· ·
I wish to decline my Cha annual park pass for gif	ampions Society membership benefit of the America the Beautiful t of \$1,000 or above.
☐ I am interested in inform	mation on planned gifts to the National Park Foundation.
	ayable to the National Park Foundation , or charge your gift to: SA Mastercard Discover
Card Number	Exp. Date
Cardholder's signature	
Please return this form to:	National Park Foundation Attn: Gift Processing PO Box 17394 Baltimore, MD 21298-9450

Will your company match your gift? Visit www.nationalparks.org to find out more.

For further information, please email DonorServices@nationalparks.org or call 1-888-GoParks (1-888-467-2757). Thank you for your support.