



Loyalhanna Watershed Association
2021 Membership Renewal Application

Name:

Company/Organization:

Address 1:

Address 2:

City:

State:

Zip:

Phone:

Email:

Check this box if you are interested in becoming a LWA volunteer.

Please **Do Not** list my name in LWA's quarterly newsletter

Membership Level

All Contributions Are Tax-Deductible

- | | |
|------------------------------|-------------------------------|
| _____ \$20 - \$49 ~ Friend | _____ \$250 - \$499 ~ Sponsor |
| _____ \$50 - \$99 ~ Donor | _____ \$500 - \$999 ~ Steward |
| _____ \$100 - \$249 ~ Patron | _____ \$1,000+ ~Benefactor |

Annual Membership Contribution: \$ _____

Donate a special \$50 for the 50th! \$ _____

Other Contribution Amount: \$ _____

Total Enclosed: \$ _____

Enter Credit Card information below or make checks payable and mail to:

Loyalhanna Watershed Association
6 Old Lincoln Highway West
Ligonier, PA 15658

_____ Credit Card Number

_____ Name as it appears on card

_____ Expiration Date

_____ CVV

_____ Zip Code on acct.

Thank you for supporting the Loyalhanna Watershed Association!