



# MEMBERSHIP ENROLLMENT FORM

Thank you for helping to protect and improve our state parks by becoming a member of CSPF!

## CHOOSE YOUR DONATION AMOUNT

\$25     \$50     \$100     \$250     \$500     \$ Other \_\_\_\_\_

*this amount or higher will help improve more parks!*

I want to help parks all year round with a monthly gift of \$\_\_\_\_\_ [\$5 per month minimum]

## YOUR MEMBERSHIP BENEFITS

When you join CSPF with a contribution of \$25 or more, you'll receive all of the benefits of membership:

- One-year subscription to *Sunset* magazine (a \$16 value) • "I Love My State Parks" tote bag and decal
  - 10% discount on California state park camping reservations made online through Reserve California
  - The CSPF *Parklands* newsletter and CSPF eNews • Invitations to CSPF special events
- Maximize my donation** – Thanks, but I'll decline all the benefits so I can maximize my support for CSPF's work on behalf of state parks.
- Thanks! I would like all of the benefits, but don't send *Sunset* magazine.
- Yes! Please send me all of the benefits, including *Sunset* magazine.

## MEMBER INFORMATION

Mr.    Ms.    Mrs.   First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_

## PAYMENT INFORMATION

My check payable to California State Parks Foundation is enclosed.

Please charge my membership gift to my credit card.

Visa     MasterCard     Discover     American Express

Card Number \_\_\_\_\_ CVV \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

## MAIL YOUR FORM

Please return this form to: California State Parks Foundation  
Attn. Member Services  
33 New Montgomery Street, Suite 520  
San Francisco, CA 94105

For more information or assistance, please contact our Member Services Team at 415-262-4400 or email them at [members@calparks.org](mailto:members@calparks.org).