



MEMBERSHIP RENEWAL FORM

Thank you for renewing your commitment to protecting and improving our state parks!

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 renew your membership 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)
- 10% discount on California state park camping reservations made online through Reserve America
- The CSPF *Parklands* newsletter and CSPF eNews
- Invitations to CSPF special events

Maximize my donation – Thanks, but I'll decline *Sunset* magazine so I can maximize my support for CSPF's work and make my gift 100% tax-deductible.

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 _____ Exp. Date _____

Signature _____

MAIL YOUR FORM

Please return this form to: California State Parks Foundation
Attn. Member Services
50 Francisco Street, Suite 110
San Francisco, CA 94133

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