

# Fellowship Farm Membership Form

Please fill in the requested information below, print this form, and mail with your check to Fellowship Farm.

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Day Phone #: \_\_\_\_\_ Evening Phone #: \_\_\_\_\_

Yes, I want to become a Member of Fellowship Farm and help to **build the Farm into the future**.  
I would like to become a Member at the following level:

Individual.....\$35.00 per year

Family .....\$60.00 per year

\*Please include names of all family members and ✓ for members under 15 years of age.

\_\_\_\_\_  \_\_\_\_\_

\_\_\_\_\_  \_\_\_\_\_

\_\_\_\_\_  \_\_\_\_\_

Fellowship Farm Partner.....\$100.00 per year

We welcome your calls and visits to the Farm. Thank you for your involvement **building the Farm into the future**.

Fellowship Farm • 2488 Sanatoga Road • Pottstown, PA 19464 • 610-326-3008

[www.fellowship-farm.org](http://www.fellowship-farm.org) • [info@fellowship-farm.org](mailto:info@fellowship-farm.org)