

with anyone else.)

Membership/Donation Form

Members	Membership:		
Yes! Please start/re in the amount of:	se start/renew my membership to support Prairieland Market. Enclosed is my check bunt of: 0		
□ \$100		□ \$25	
□ \$50			
onation	* (all donations cou		
Yes! I would like to s my check in the am	• •	Market with my <i>tax-deductible*</i> donation. Enclosed i	
\$1,000		□ \$100	
□ \$500		□ \$50	
□ \$250		☐ Other:	
Donor/Mem	ber Information	n:	
Name:			
Address:			
City:	ST:	Zip:	
Phone:	Email:		

*FOR TAX-DEDUCTIBLE DONATIONS, PLEASE MAKE YOUR CHECK PAYABLE TO PRAIRIELAND MARKET ALONG WITH THIS FORM AND BRING OR MAIL TO:

> Prairieland Market 305 E Walnut St Salina, KS 67401 (785) 827-5877

(Information is for Prairieland Market communication purposes only – we do not share this information