

Prairieland Membership/Donation Form



Membership:

Yes! Please start/renew my membership to support Prairieland Market. Enclosed is my check in the amount of:

☐ \$100

☐ \$25

☐ \$50

☐ Other:_____



Donation*

Yes! I would like to support Prairieland Market with my *tax-deductible** donation. Enclosed is my check in the amount of:

☐ \$1,000

☐ \$100

☐ \$500

☐ \$50

☐ \$250

☐ Other:_____

Donor/Member Information:

Name: _____

Address: _____

City: _____ ST: _____ Zip: _____

Phone: _____ Email: _____

(Information is for Prairieland Market and Local Food Works Foundation communication purposes only - we do not share this information with anyone else.)

***FOR TAX-DEDUCTIBLE DONATIONS, PLEASE MAKE YOUR CHECK PAYABLE TO LOCAL FOOD WORKS FOUNDATION WITH "PRAIRIELAND MARKET" ON THE MEMO LINE ALONG WITH THIS FORM AND BRING OR MAIL TO:**

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