



MEMBERSHIP FORM

Print this form and mail with payment to:

Vegetarians of Washington
12819 SE 38th St #427
Bellevue, WA 98006

- I/We wish to join Vegetarians of Washington**
 I/We wish to renew our Membership

I/We enclose:

- \$24 – Individual
 \$36 – Family
 \$50 – Supporter
 \$100 – Patron

Name(s) _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone: _____

We will not share your contact information with anyone else without your prior consent.

- Please send me my free vegetarian cookbook (no eggs or dairy)

Paying by Check: Please make checks payable to “Vegetarians of Washington”

Paying by Credit Card:

Card No: _____ Exp _____

Zip Code (if different from above): _____ Security Code: _____

Signature _____