WATERSHED MEMBERSHIP FORM

Please return this form with your check, payable to: Washington County Watershed Alliance;

Mail to: 50 Old Hickory Ridge Road, Suite 1, Washington, PA 15301

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

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

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Membership Organizations and Levels (Individual or Family):**

## -Multiple associations can be selected-

**Alliance** - **🞎** Individual-$10, **🞎** Family-$15

**Buffalo Creek** - **🞎** Individual-$10, **🞎** Family-$15

**Chartiers Creek** - **🞎** Individual-$10, **🞎** Family-$15

**Ten Mile Creek** - **🞎** Individual-$10, **🞎** Family-$15

**Upper Wheeling Creek** - **🞎** Individual-$10, **🞎** Family-$15

# TOTAL ENCLOSED $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\*As a 501 (c) 3 charity we are required to certify that you received no goods or services for this donation; therefore, the full amount of your gift is tax deductible.*

*Thank you!*

**🞎** Check here if you want a receipt for your tax records