Memb	ership Levels (selec	et one)	
	Senior \$20. (Age 65 ar Individual \$25. Household \$50. Sustaining \$100. (Ind Lifetime \$500. (Ind	ld up) cludes household m	
Memb	er Name		
Name			
Additional n (for household membership o	đ		
Phone	()		
Email(s)			
Mailing Ac	ldress		
	City	State	Zip Code
Please mail this form with your check to the address below. Or join online at https://ortonbotanicalgarden.com/			

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