

THE NORCROSS CENTER

P.O. Box 532, East Longmeadow, MA 01028-0532

Pledge \$_____per year for five years.

One-time donation of \$_____which is enclosed or pledged.

SPONSORSHIP (Includes family membership) _____: \$100 or more per year

MEMBERSHIP: _ Individual : \$ 35.00 per year____ Family : \$ 50.00 per year

Business :__ Friend : \$50.00 per year ____ Benefactor : \$100 or more per year

AMOUNT ENCLOSED _____

Name: _____Address_____