

## Membership/Contribution Mail-in Form

All Memberships Include Receipt of BRAW's Wisconsin Bluebird Newsletter

	Please Print Clearly	
I am completing this form to:	Name:	
☐ Join BRAW as a New Member	Address:	
	City: State: Zip Code:	
Renew my BRAW Membership	Email Address:	
	Telephone Number: ()	
☐ Make a Gift Membership	County of Residence:	
Plea	se Select Desired Membership:	
•	nline Wisconsin Bluebird newsletter is e-mailed mailed to your gift recipient ship (Online version of Wisconsin Bluebird e-mailed mailed to you)	
\$40 Extended Online Annual Me	mbership for 2 years.	
S60 Extended Online Annual Me	mbership for 3 years.	
\$25 Individual or Family Annual I	Membership (printed copy of Wisconsin Bluebird is mailed to you)	
\$75 Individual or Family Annual I	Membership for 3 years (printed copy of WB newsletter is mailed to you)	
\$300 Life Membership		
Please Select Desired Contribution to	Support BRAWS' Ongoing Bluebird Field and Research Activities	
\$15 for nest box construction w	ith post & predator guard	
\$100 for nest box trail		
☐ \$ for Bluebird Research		
☐ In addition to my membership co	ntribution, I wish to contribute \$ (contributions to BRAW are tax deductible	
Enclosed please find my check/mone	ey order made out to BRAW, Inc. (please do not send cash) \$	
Please mail t	this membership/contribution request to:	
	BRAW, Inc.	
	Valerie Van Winkle P O Box 628492	

Memberships expire as noted on you mailing label and should be renewed immediately to ensure continued access to newsletters.

If you join during the year, you will be on a quarterly membership basis and will not receive back issues of Wisconsin Bluebird.