



To support, promote, enhance and protect The Legacy Trail, a Sarasota County Park, and its trail connectors now and for future generations.

MEMBERSHIP FORM

Today's Date _____

Please Print Clearly

TYPE OF MEMBERSHIP (Check one):

INDIVIDUAL (DUES ARE \$15 PER YEAR)*

FAMILY (DUES ARE \$20 PER YEAR)*

*Your membership card will be sent to you by email. See our website for membership discounts at local businesses: www.friendsofthelegacytrail.org

MEMBER NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

If family membership: FAMILY MEMBER NAME: _____

PHONE _____ EMAIL _____

Do you live full-time or part-time in Florida? Full-time Part-time Visitor

Is this membership new or a renewal? New Renewal

PLEASE CONSIDER A DONATION TO SUPPORT THE TRAIL: DONATION AMOUNT \$ _____

TOTAL (Include dues and donation) \$ _____

ARE YOU INTERESTED IN LEARNING ABOUT VOLUNTEER OPPORTUNITIES?

We are an all-volunteer organization and offer many fun and interesting programs, events and activities throughout the year that support our mission and the community.

Yes, contact me. If you know what you'd like to do, please indicate: _____

THANK YOU FOR YOUR SUPPORT!

Send this completed form and check (payable to Friends of The Legacy Trail) to:
Friends of The Legacy Trail, P.O. Box 792, Osprey, FL 34229

www.friendsofthelegacytrail.org

Friends of The Legacy Trail, Inc. is a Florida not-for-profit corporation.