



# River District Association

## Membership Form

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

Company (Not-for-Profit/Business/Corporate Memberships Only): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

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

Young Professionals Level:  (\$35)

Individual Membership Level:  (\$50)

Business Membership Level:  (\$150)

Corporate Membership Level:  (\$250)

Association/Not-for-Profit Membership Level:  (\$100)

Additional Individuals (Not-for-Profit/ Business/Corporate Membership Levels Only):

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Yes I would also like to make a tax-deductable donation to the River District Association, a 501 (c) (3), the amount of: \$ \_\_\_\_\_

Total Membership and Donation: \$ \_\_\_\_\_

Please mail to: River District Association, c/o RACVB, 102 N. Main St. Rockford, IL 61101

Info@riverdistrict.com

(779)207-0110