



Brookline Community Aging Network

YES! I / we wish to give a BrooklineCAN membership to

Recipient Name(s) _____
Address _____
_____ Zip _____
Phone(s) _____
Email(s) _____
Please mail the gift membership certificate to <input type="checkbox"/> he/she/them <input type="checkbox"/> me

The enclosed check is made out to BrooklineCAN in the following amount:

- \$35 – Annual Individual Membership
- \$55 – Annual Household Membership
- \$95 – Three-year Individual Membership
- \$155 – Three-year Household Membership

Sponsoring Memberships (Annual)

- | | |
|---|--|
| <input type="checkbox"/> \$100 – Bronze | <input type="checkbox"/> \$500 – Gold |
| <input type="checkbox"/> \$250 – Silver | <input type="checkbox"/> \$1000 – Platinum |

Donor Name(s) _____

Address _____

_____ Zip _____

Phone(s) _____

Email(s) _____

Mail this form with your check to 93Winchester St., Brookline, MA 02446.