

Membership Form

Please check Membership Level

☐ <u>INDIVIDUAL</u> (\$30) Includes one adul	t or child.				
☐ FAMILY (\$60) Includes up to 4 children	en and two adı	ults.			
☐ <u>FAMILY PLUS</u> (\$100) Includes up to	2 adults and si	x children O	R 4 adults and	4 children.	
☐ <u>RED ROBIN</u> (\$101-\$249) Same as FA	MILY PLUS	and the know	ledge of knowi	ing that you are doing	ng more!
*Children are defined as age 17 or	under.				
☐ I would like to make a donation of \$ (Donations of \$250 or more to the Annual				PLUS membership	.)
Name(s) of primary member(s):					
Telephone:	En	nail:			
Address:	То	wn:	State:	Zip:	
Participo Subscription to even Discount Free adi	ts for many wo nission to the	n Rock Sum "The Robin S orkshops and Barnes Natu	mer Camp Speaks" E- new I programs		
Please make check payable to: ELCCT	501 Wolcot	t Rd. Bristol	, CT 06010		
Or pay by credit card: Mastercard	□ Visa	☐ America	an Express	☐ Discover	
Card #:	_ Expiration	Expiration Date: Amount: \$			
Signature:	_ Name as it	appears on th	ne card:		
	I am willing to	volunteer fo	or:		
☐ Office ☐ Barnes Front Desk	☐ Events	☐ Facilitie	es 🗖 Educati	on	are

Thank You!!