THE HASTINGS CENTER

Annual Fellows Dues……..$200

___ I would like to pay my annual Fellows dues of $200.

___ I would like to make an additional contribution in the amount of _____ with my dues.

___ I would like to make a pledge in the amount of _____ to be distributed to the Center by _____ along with my dues.

Payment

___ Enclosed is a check in the amount of $200 made payable to The Hastings Center.

___ Enclosed is a check in the amount of $_____ which includes the $200 Fellows dues and an additional contribution.

___ If you would prefer to pay by credit card, please include your card information below or call 845-424-4040, ext. 234 to pay by phone.

_____ _____ _____

Credit Card Number **CVV#** **Exp Date**

_____

Telephone Number

Name _____

Please Print

Signed: _____

Please mail completed form and payment to The Hastings Center, attention Jodi Fernandes.

21 Malcolm Gordon Road, Garrison, New York 10524-5555
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