

Humane Society of Washington County Membership Form

Date_____

Last Name_____

First
Name(s)_____

Address_____

City_____ State_____

Zip_____

Phone_____ Cell Phone_____

Email_____

Please indicate if you would be willing to help with any of the following:

Fund-raising__

Yard Sale__

Other
(specify)_____

Enclosed:

Family Membership \$20.00 _____

Donation Amount _____ In memory of _____

The Humane Society of Washington County is a 501 c3 no-profit organization. All donations are tax deductible.

Mail to:

Humane Society of Washington County

204 W. Joseph St.

Salem, IN 47167