



Membership Form

Join online at sdbg.org or mail your application to:

San Diego Botanic Garden
PO Box 230005, Encinitas, CA 92023-0005

Select Your Level

Price

Named Members

<input type="checkbox"/> Individual 1 Adult	\$55	1 _____ <i>Primary Member: First / Last Name</i> _____ <i>Email</i>
<input type="checkbox"/> Dual 2 Adults	\$95	2 _____ <i>Second Member: First / Last Name</i> _____ <i>Email</i>
<input type="checkbox"/> Family 2 Adults + 6 Children <18	\$105	
<input type="checkbox"/> Family Plus 4 Adults + 12 Children <18	\$165	3 _____ <i>Third Member: First / Last Name</i> _____ <i>Email</i> 4 _____ <i>Fourth Member: First / Last Name</i> _____ <i>Email</i>

Auto Renewal

- ☐ Yes *San Diego Botanic Garden offers auto renewal as a convenience to our Members who don't want to miss a day of their benefits. By selecting **yes**, your membership will automatically renew at the end of your annual term.*
- ☐ No

Address

Address *Apt.*

City *State* *Zip*

Phone Number

How would you like your member cards?

- ☐ Digital ☐ Paper Card *(Pick up at Welcome Center)*

Summary of Support

Membership Contribution: \$ _____

☐ Senior 60+ ☐ Military ☐ Student \$ _____

One Discount Per Membership (10%)

☐ Annual Fund Contribution \$ _____

Total Amount Enclosed: \$ _____

Payment Method

☐ Check *(Payable to San Diego Botanic Garden)*

☐ Visa ☐ Mastercard ☐ Discover

☐ American Express

Account Number *Security Code* *Exp. Date*

Signature