



Membership Form

Date: _____

Name: _____

Organization: _____

Address: _____

City: _____ St _____ Zip _____

Telephone – Home: _____ Cell: _____

E-mail: _____

I want to join The Peace Center!		
<i>I'm Enclosing My Contribution of:</i>		
___	\$ 1000	Peace Pillar
___	\$ 500	Peace Protector
___	\$ 250	Peace Patron
___	\$ 125	Peace Partner
___	\$ 52	Peace Pal (just \$1/week!)
___	\$ 20	Student/Limited Income
___	\$ _____	Other

I'm also interested in becoming involved in the following areas:

Print this form, fill in, and mail with your tax-deductible contribution made payable to:

The Peace Center
102 W. Maple Ave.
Langhorne, PA 19047-2820