



I'd like to make a single tax-deductible gift of:

☐ \$35 ☐ \$50 ☐ \$100 ☐ \$250 ☐ Other \$ _____

I'd like to become a Monthly Partner and support NRDC with automatic tax-deductible monthly gifts of:

☐ \$10 ☐ \$15 ☐ \$20 ☐ \$25 ☐ Other \$ _____

I can increase, decrease or suspend my monthly support at any time by contacting NRDC at membership@nrdc.org.

Signature: _____

Please fill in your account information below.

Name: _____

Street Address: _____

City, State, Zip: _____ **State:** _____ **Zip Code:** _____

Email Address: _____

☐ I am enclosing a check (made payable to NRDC)

☐ I want to charge my credit card:

☐ AMEX ☐ Visa ☐ MasterCard ☐ Discover

Credit Card Number: _____

Exp. Date: _____ **Signature:** _____

Mail to: NRDC, P.O. Box 1830, Merrifield, VA 22116-8030

Email: membership@nrdc.org **Phone:** 212.727.4432

Thank you very much for your tax-deductible contribution!