



Friends of Okeehlee Nature Center
Membership Form

Please fill out this form, print it and return it along with your payment to:

Okeehlee Nature Center
7715 Forest Hill Boulevard
West Palm Beach, Florida 33413

Please, make checks payable to: **Friends of Okeehlee Nature Center**

Name(s):

Address:

City:

State:

Zip:

Phone:

Email:

If interested in volunteering at the Nature Center, check here:

(Volunteer minimum age: 15. Under 18: Parent/guardian approval required.)

Membership Type

Student (\$10)

Individual (\$20)

Family (\$35)

Business (\$250)

Donation \$ _____

Office Use Only

Date: _____

New ___ Renewal ___

Payment

\$ _____ Cash

\$ _____ Check # _____

Thank you for your continuing support!