

<b>PROPRIETARY HOUSE ASSOCIATION MEMBERSHIP</b>		<input type="checkbox"/> NEW	Date _____	
Please enroll me as a member in the category indicated below.		<input type="checkbox"/> RENEWAL		
Name/Family/Organization		The Proprietary House is a recognized 501 (c) (3) non-profit organization. Your membership donation is tax deductible. As a tax exempt corporation, the Proprietary House Association is eligible to receive matching gifts. If your employer offers such a program, your gift will be doubled. Please send matching gift forms with your membership donation.		
Address				
City	State			Zip
Telephone/Cell				
Email				
Please make checks payable to:  <b>The Proprietary House Association</b>	<input type="checkbox"/> Patron (\$1000+)			
	<input type="checkbox"/> Benefactor (\$500 - \$899)			
	<input type="checkbox"/> Supporting (\$100 - \$499)			
	<input type="checkbox"/> Sustaining (\$56 - \$99)			
	<input type="checkbox"/> Family (\$55)			
	<input type="checkbox"/> Individual (\$35)			
<input type="checkbox"/> Senior/Student (\$15)				
<b>Method of Payment:</b> <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Money Order				
My company has a matching gift program. Yes _____ No _____				

If you are interested in volunteering, please let us know how to contact you.

Email \_\_\_\_\_

Phone \_\_\_\_\_

Mail \_\_\_\_\_

Please mail your check and this form to:

**The Proprietary House**  
**149 Kearny Avenue**  
**Perth Amboy, NJ 08861**  
**Attn: Membership**

THANK YOU FOR YOUR MEMBERSHIP AND DONATION.

STAFF USE ONLY

Date Received \_\_\_\_\_

Date Recorded \_\_\_\_\_

Initials \_\_\_\_\_