

Join the Rainforest Alliance and Help Protect the Planet!

Please return this form along with your tax deductible gift to Rainforest Alliance, 233 Broadway, 28th Floor, New York, NY 10279

Name:					
Address:		City: _			State:
Country:		Zip: _		Phone:	
Email:					
Please make my gi	ft in honor of som	eone else (optional):			
Name:					
Email:					
Please select a gift	amount:				
Member \$50	\$100	\$250	\$500	Other \$	
Canopy Associate \$1,000	\$2,500	\$5,000	\$10,000	Other \$	
Please select your	complimentary gif	t (optional):			
Rainforest Allian	nce Plush Frog (\$3	35 minimum)			
Rainforest Allian	nce Tote Bag (\$50	minimum)			
Rainforest Alliar	nce Umbrella (\$10	0 minimum)			
Please select your	payment method:				
Check payable	to "Rainforest Allia	ance"			
Credit card (mir	nimum donation \$1	10)			
□ VISA	□ VISA □ MasterCard			press	
Card nui	mber:			-	Expiration date:
Signatur	e:				