

DODGE COUNTY HUMANE SOCIETY

Membership Form



YOUR INFORMATION:

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

MEMBERSHIP CATEGORIES:

- Member \$25-\$49** Provides a dry diet for all shelter dogs for one week
- Friend \$50-\$99** Sponsors the adoption for one of our hard to adopt cats
- Sponsor \$100-\$249** Pays for vaccinations for 6 of our animals
- Companion \$250-\$499** Provides medical care for our senior animals
- Guardian \$500-\$999** Pays for 10-20 spay/neuter procedures
- Patron \$1,000+** Provides veterinary care for special needs animals
- I would like to make an additional gift of \$_____
- I am interested in including DCHS in my will or other planned giving
- I would like to become a DCHS volunteer

For Tribute Gifts:

In Honor of: _____ Person Pet

In Memory of: _____ Person Pet

On the Occasion of: _____

Send Honor/Memorial Card to: _____

Address: _____

City: _____ State: _____ Zip: _____

PAYMENT INFORMATION:

Amount Donated: \$_____

Check Credit Card - VISA, MasterCard, Discover (Please circle one)

Name on card: _____

Card Number: _____ Expiration Date: ____/____

Signature: _____ Date: _____

If you have any questions, please call (920) 386-0000

Mail completed form and payment to:

Dodge County Humane Society
N6839 State Road 26
Juneau, WI 53039

Thank you for your support