

# TOWER HILL

## DR. JOHN GREEN SOCIETY/WCHS MEMBERSHIP BENEFITS

- New Dr. John Green Society member
- Dr. John Green Society renewal
- Yes! I/we wish to support WCHS at Tower Hill Botanic Garden at the following Dr. John Green Society leadership donor level:
- Dr. John Green Society —\*\$1250 Includes \$100 Friend Membership**  
Friend Membership level benefits:
  - Admission and discounted benefits for 2 adults and children under 19 living in the same household
  - Four guest admissions per visit to Tower Hill
  - Free subscription to the quarterly newsletter *Grow With Us!* and program guide *Learn With Us!*
  - Advance notice and reduced rates for classes, trips, special events and workshops
  - Access to some of the most well-respected horticulturists
  - Discounts and special “members only” sales at The Shop At Tower Hill.
  - Discounts at participating nurseries and gardening businesses throughout the area.
  - Early admission to our renowned Annual Plant Sale
  - Reciprocal admission privileges to more than 125 gardens, conservatories and arboreta
  - Borrowing privileges from the extensive collection in the WCHS library.
- I/we wish to support Dr. John Green Society membership at a more significant level
- Dr. John Green Society Contributing Member. \*\$1500**
  - Benefits for Friend Member, plus one-year subscription to *People, Places, and Plants* magazine.
- Dr. John Green Society Supporting Member. \*\$1750**
  - Benefits for Contributing Member plus a free WCHS sponsored day trip for 2 people.
- Dr. John Green Society Patron Member. \*\$2250 and higher**
  - Benefits for Supporting member, plus a garden consultation with a WCHS staff horticulturist.



## DR. JOHN GREEN SOCIETY MEMBERS INFORMATION

Name (please print): \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (H): \_\_\_\_\_ (W): \_\_\_\_\_

E-mail: \_\_\_\_\_

Preferred spelling of name(s) on card(s): \_\_\_\_\_



Please do not share my name with other organizations.

I/we intend to apply for a matching gift from: Company name: \_\_\_\_\_

Please make checks payable to WCHS.

Amount enclosed: (\$) \_\_\_\_\_ Check #: \_\_\_\_\_

Please charge my credit Card:  VISA  MasterCard  Discover  American Express

Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_ V-code (3 digit number, back of card, signature area): \_\_\_\_\_

Signature: \_\_\_\_\_

Please automatically renew my Dr. John Green Society membership annually by charging my card.

**Please mail your check (if applicable) and this form to:**

Tower Hill Botanic Garden, Attention: Development Office, P.O. Box 598, Boylston, MA 01505-0598

*\*Contributions are tax-deductible to the extent permitted by law.*

Note: If you desire an alternate payment schedule, please call 508-869-6111, ext. 114 to make arrangements.

**Thank you for your continued generous support!**