

LMSG Membership Application

Yes, I want to become a member of the Living Memorial Sculpture Garden. I have included my check to help in its support.

LIFETIME MEMBERSHIP *(Name engraved on the Gene Breceda Sponsor Wall)*

\$400 Lifetime Individual Membership

ANNUAL MEMBERSHIP

\$25 Contributor

Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____ Telephone: _____

Email Address: _____

Please mail your application and check to:

**LMSG P.O. Box 301
Weed, CA 96094**

Questions? Phone **(530) 842-2477** or **(530) 938-4858**