



# Donation and Membership Form

***Please tell us about yourself***

**Name:**

**Address:**

**City:**

**State:**

**Zip code:**

**Email:**

**Phone (Day):**

**(Evening):**

***Please tell us about your rabbit(s)***

## House Rabbit Society Membership

Indiana HRS Chapter Membership		National HRS Membership	
<input type="checkbox"/>	<b>One Year: \$12.00</b>	<input type="checkbox"/>	<b>One Year: \$18.00</b>
<input type="checkbox"/>	<b>Lifetime: \$250</b>	<i>\$5 of your National HRS membership remains with IHR S if you renew through the chapter!</i>	
	<input type="checkbox"/> new <input type="checkbox"/> renewal		<input type="checkbox"/> new <input type="checkbox"/> renewal

## Tax Deductible Donations

<input type="checkbox"/>	<b>\$100</b>	<b>My employer will match my gift through a donation matching program <input type="checkbox"/>yes <input type="checkbox"/>no</b>
<input type="checkbox"/>	<b>\$50</b>	
<input type="checkbox"/>	<b>\$25</b>	
<input type="checkbox"/>	<b>Other:</b>	<b>If yes, employer name and phone:</b>

**Please contact me, I can't afford membership or donation right now. I would love to volunteer my time to help Indiana HRS foster rabbits and earn membership credits!**

**Please enclose this form and your check or money order for your membership amounts and/or donation and postal mail to:**

**House Rabbit Society, Indiana Chapter  
P. O. Box 421746  
Indianapolis, IN 46242-1746**