

CORPORATE MEMBERSHIP INFORMATION FORM

South Texas Botanical Gardens & Nature Center

8545 S. Staples St. Corpus Christi, TX 78413 361-852-2100 Fax 361-852-7875

Company Name _____

Contact Name _____

Contact Title _____

Contact Phone _____ E-Mail _____

Mailing Address _____

City, State, Zip _____

MEMBERSHIP LEVEL _____

PAYMENT INFORMATION:

Check # _____ **Check Amount \$** _____

Please make check payable to: **South Texas Botanical Gardens & Nature Center
8545 S. Staples St.
Corpus Christi TX 78413**

Credit Card: _____ MasterCard _____ Visa

Card Number _____ Expiration Date: _____

Name on Card _____

Card Billing Address: _____

City, State, Zip _____

Authorization Name (please print) _____

Authorized Signature _____

Title _____ Date _____

THANK YOU!

Flora, Fauna, Fun!

361-852-2100