

_____ *Yes, I will join the Preservation League of Staten Island!*

Name _____

Address _____

City _____ *State* _____ *Zip* _____

Email _____

_____ *\$15 Senior or student* _____ *\$50 or* _____ *\$100 Patron*

_____ *\$25 Individual* _____ *\$150 Corporate sponsor*

_____ *\$40 Family*

Check enclosed for \$ _____ *payable to the Preservation League of Staten Island.*

**Preservation League of Staten Island
P.O. Box 309, Staten Island, NY 10310**