



2019 Woodlawn Croquet Program Form

Name(s): _____

Summer (local) Address:

Street: _____

City: _____ State: _____ Zip: _____

Phone number: _____ Email: _____

Winter Address (if applicable):

Street: _____

City: _____ State: _____ Zip: _____

Croquet Program Fees: _____ People at \$160 per person: \$ _____

I wish to make an additional donation to Woodlawn Croquet: \$ _____

Note: Tax deductible donations are welcome and will be used to cover the purchase of new equipment and to help cover the expenses of running the croquet program. Our 2019 budget of \$10,000 will need to be raised from program fees, misc. fees, tournament fees, and from generous tax deductible donations made from members and friends of Woodlawn Croquet.

Other donation to Woodlawn Croquet Program (fully tax deductible) \$ _____

I would like to be a Woodlawn Museum Member; [\$35 individual, \$50 Household] \$ _____

Total amount due (program fees and donation) \$ _____

Please make checks payable to Woodlawn or provide credit card information.

Visa Mastercard Discover American Express Expiration Date: _____ / _____

Card Number: _____ Security Code: _____

Signature: _____ Billing Zip Code: _____

I would like to volunteer at Woodlawn. Please have a staff member contact me!

Send your payment and program form to:

Woodlawn Croquet
P.O. Box 1478
Ellsworth, ME 04605