



Membership Form

Please complete and mail with your check to:
Orleans Improvement Association, Inc.
Post Office Box 1584, Orleans, MA 02653

1985-2010 CELEBRATING 25 YEARS SERVING THE TOWN OF ORLEANS

Name: _____ Date: _____

Mailing Address: _____

Telephone: _____

Email Address: _____

Membership Level:

Please check one:

- Individual \$15.00
- Family \$25.00
- Contributing \$30.00
- Business \$30.00
- Patron \$50.00
- Other \$ _____
- Special 25th Anniversary Gift \$ _____

Comments: _____

May we add your name to our list of volunteers? _____

Thank you!

Your membership donation is tax-deductible.