



Membership & Donation Form

I would like to: Join Renew (Member # _____) Make a Donation

Name _____ Birth Date/Age: _____
Address _____
Phone _____ E-mail _____ **e-mail will never be shared with outside organizations*

For membership:

Please enroll me as a member of the chapter I have checked (included in your dues):

- | | |
|---|---|
| <input type="checkbox"/> Adirondack Loj (supports Loj facilities) | <input type="checkbox"/> Laurentian (St. Lawrence/Ottawa River Valleys) |
| <input type="checkbox"/> Albany | <input type="checkbox"/> Long Island |
| <input type="checkbox"/> Algonquin (Plattsburgh) | <input type="checkbox"/> Mid-Hudson (Poughkeepsie) |
| <input type="checkbox"/> Black River (Watertown) | <input type="checkbox"/> Mohican (Westchester/Putnam/Fairfield, CT Co.) |
| <input type="checkbox"/> Binghamton | <input type="checkbox"/> New York |
| <input type="checkbox"/> Cold River (Central ADKs) | <input type="checkbox"/> Niagara Frontier (Buffalo) |
| <input type="checkbox"/> Connecticut | <input type="checkbox"/> North Jersey/Ramapo (NJ, Orange/Rockland Co.) |
| <input type="checkbox"/> Finger Lakes (Ithaca/Elmira) | <input type="checkbox"/> North Woods (Saranac/Tupper) |
| <input type="checkbox"/> Foothills (Gloversville/Johnstown) | <input type="checkbox"/> NPTrail (supports the Northville-Placid Trail) |
| <input type="checkbox"/> Genesee Valley (Rochester) | <input type="checkbox"/> Onondaga (Syracuse) |
| <input type="checkbox"/> Glens Falls-Saratoga | <input type="checkbox"/> Schenectady |
| <input type="checkbox"/> Hurricane (Keene) | <input type="checkbox"/> Shatagee Woods (Malone) |
| <input type="checkbox"/> Iroquois (Utica) | <input type="checkbox"/> Susquehanna (Oneonta) |
| <input type="checkbox"/> Keene Valley | <input type="checkbox"/> Member at Large |

Please choose number of years:

- 1 year 2 years 3 years
 Life member

Please choose a membership category:

- Student (full-time)
 Adult
 Family
 Senior (65+)
 Senior Family (65+)
 Life Adult
 Life Family

For more information on chapter and affiliate memberships see: ADK.org

For family memberships (list only children under 18):

Spouse/Partner Name _____ Birth Date _____

Child _____ Birth Date _____

Child _____ Birth Date _____

Child _____ Birth Date _____

Membership Rates:

Category	1-Year	2-Year	3-Year
Adult	\$50.00	\$90.00	\$135.0
Family	\$60.00	\$110.0	\$165.0
Senior	\$40.00	\$70.00	\$100.0
Sr. Family	\$50.00	\$90.00	\$130.0
Student	\$25.00	--	--
Life Adult	\$1,300	--	--
Life Family	\$1,950	--	--

Payment: Membership Amount \$ _____ and/or Donation Amount \$ _____

Check enclosed (US funds) made out to Adirondack Mountain Club or ADK

Please charge my Visa Master Card American Express

Credit Card # _____ Exp. Date _____

Signature _____ Security Code _____

Pay at one of our offices or mail form to:
 Adirondack Mountain Club
 Membership Department
 PO Box 4390
 Queensbury, NY 12804

*Please allow 2-3 weeks for your membership card to arrive. Please call 1-800-395-8080 and press 3 for membership if you need a temporary card or have any questions. **Make sure to check our website out at ADK.org for hundreds of free outings and more info!***