



(828) 765-9531

altapass.orchard@gmail.com

www.altapassorchard.org

## Altapass Foundation Response Form

Whether you choose to become a member or to make a special donation, your contribution helps to support the mission of the Orchard at Altapass.

Member/Donor Name(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

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### Annual Membership

(please enter amount of donation)

<b>Seed</b>	<b>Individual:</b> (\$30 to \$99) _____	<b>Couple:</b> (\$50 to \$99) _____	<b>Family:</b> (\$70 to \$99) _____
<b>Bud</b>	\$100 to \$249	\$ _____	
<b>Blossom</b>	\$250 to \$499	\$ _____	
<b>Apple</b>	\$500 to \$999	\$ _____	
<b>Tree</b>	\$1000 or more	\$ _____	

### Membership Benefits

Level	Free Pass*	Free Cutting	Jarred Food	Pick a Peck	Rhododendron	1-Time 20% Store Discount
Seed	1 per member	1 per member	-	-	-	-
Bud	1 per member	1 per member	1 per household		-	-
Blossom	1 per member	1 per member	1 per household	1 per household	-	-
Apple	1 per member	1 per member	1 per household	2 per household	1 per household	-
Tree	1 per member	1 per member	1 per household	4 per household	1 per household	1 per household

\*Free passes apply to guided walks, hayrides or Super Saturdays. Please call or email for a reservation.

Please note: All passes and benefits must be collected in person at the Orchard.

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### Special Donations

Donation for Orchard Program (please specify): \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Donation in honor/memory of: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

I have other ideas about special donations. Please contact me.

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**Please mail your check to:**

The Altapass Foundation  
P.O. Box 245  
Little Switzerland, NC 28749

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