
JOIN BRIDGES ACROSS BORDERS

– I/We would like to join as an individual member. Enclosed is a check for \$ _____.
(Sliding scale \$15 - \$50 or more)

– I/We would like to join as a group or organization. Enclosed is a check for \$ _____.
(Sliding scale of \$25 - \$100 or more)

– I prefer to make a donation without membership. Enclosed is a check for \$ _____.



Name: _____ Organization: _____

Address: _____ City: _____

State, Zip: _____ Telephone: _(_____) _____

Email: _____ Web address: _____

In order to share our delight in cultural diversity we visit schools and other groups to give lectures and presentations to audiences of all ages. Invite us.

A copy of the official registration (CH19439) and financial information may be obtained from the division of consumer services by calling toll-free within the state 1-800-435-7352. Registration does not imply endorsement, approval, or recommendation by the state.

Return to: Bridges Across Borders, PO Box 103, Graham, FL 32042
<http://www.bridgesacrossborders.org>

Tel: (352) 485-2594
Email: office@bridgesacrossborders.org
