

Business Conservation Corps Application

Contact Information

Business name _____

Contact name _____

Email _____ Phone _____

Address _____ City/State/Zip _____

Member Level

\$5,000

\$2,500

\$1,000

\$500

\$250

\$100

In-Kind Dention

In-Kind Donation: description/\$ value if applicable

Payment

Check - *payable to* FRIENDS OF THE SMOKIES - *mail to* PO Box 1660, Kodak, TN 37764-7660

Credit card (Visa/MC/Amex) # _____ Exp date _____

Securtiy Code _____

Authorizing signature

Date

Friends of the Smokies
PO Box 1660, Kodak, TN 37764-7660
(3099 Winfield Dunn Pkwy, Ste 2, Kodak)
www.friendsofthesmokies.org



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