



ANNUAL MEMBERSHIP

YES, I want to support the ACLU in its efforts to protect our most basic freedoms. Enclosed is my membership gift of:

\$125 \$100 \$50 \$35 Other \$ _____

(Minimum donation is \$20 individual or \$30 joint; \$5 student / low-income)

Membership dues in part support the ACLU's legislative advocacy efforts and are not tax deductible as charitable contributions.

PAYMENT INFORMATION

PAYMENT TYPE Check Credit Card

Name on Card _____

Card Number _____ - _____ - _____ - _____ Exp. Date _____

CARD TYPE

- Visa
 MasterCard
 American Express
 Discover

CREDIT CARD TERMS OF AGREEMENT: I am authorizing the American Civil Liberties Union to charge my credit card account in the amount of the pledge I have indicated above.

Signature _____

Date _____

Telephone number _____

PERSONAL INFORMATION

Name _____

Phone _____

E-mail Address _____

Address _____

City _____

State _____

Zip _____

Name of 2nd person in household, if joint membership _____

2nd person's email _____

MAIL THIS COMPLETED FORM AND PAYMENT TO:

ACLU Membership Department, 125 Broad Street 18th Floor, New York, NY 10004

All membership contributions are processed by the ACLU National office. By joining the ACLU, you will be part of both the national ACLU and the Northern California affiliate.

- Please sign me up for ACLU emails to keep informed and know when to act.
- Please do not share my name and mailing address with other charities.