



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

Please choose a membership category:

- ☐ Adult
☐ Family
☐ Senior (65+)
☐ Life Adult
☐ Life Family

Membership Rates:

Category	1-Year
Adult	\$50.00
Family	\$70.00
Senior	\$45.00
Life Adult	\$1,300
Life Family	\$1,950

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 _____

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 _____

Pay at one of our locations or mail form to:
Adirondack Mountain Club
Membership Department
494 Maple Ave, Suite 1
Saratoga Springs, NY 12866

Please allow 2-3 weeks for your membership card to arrive. Please call 1-800-395-8080 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!