



Jug Tavern of Sparta, Inc. Membership Application

Name(s) _____

Address _____

Phone **Home:** _____

Other: _____

E-mail _____

Dues **Sustaining (\$100)** \$ _____

Family (\$50) \$ _____

Individual (\$25) \$ _____

Tax Deductible Gift \$ _____

- | | | | |
|--------------------|----------|--------------------|-------|
| ❖ Wellspring | \$10,000 | ❖ Charter | \$500 |
| ❖ Founder | \$2,000 | ❖ Benefactor | \$200 |
| ❖ Patron..... | \$1,000 | | |

Jug Tavern of Sparta, Inc. is a 501©3 non-profit organization. Your donation is tax-deductible to the degree permitted by law. We are also eligible for matching contributions, if your employer participates in a matching gift program

You can call on me for volunteer help with _____

**Please mail completed membership application
along with a check made payable to
"Jug Tavern of Sparta, Inc."**

to:

**Dr. Alan M. Stahl, President
The Jug Tavern of Sparta, Inc
11 Fairview Place
Ossining, NY 10562**

