Peninsula Peace and Justice Center

625 Hamilton Avenue, Palo Alto, CA 94301

Annual Membership Contribution Form

Please check one:

Individual Membership $45 __ | Family/Household Membership $65 __

Other Amount __ (Amount: $_____)

Please make your check payable to "PPJC" and mail to the address above.

Name _____

Address _____

City, ST, Zip _____

Email _____

To pay by credit card:

Amount $_____

Name _____

Address _____

City, ST, Zip _____

Email _____

Check one: Visa __ | MasterCard __ | Discover __

Card Number: ___ | ___ | ___ | ___ | ___ | ___ | ___ | ___ | ___ | ___ | ___ | ___ | ___ | ___ | ___ | ___ |

Expiration Date: ____ / ____

Your signature: _____

Thank you!

Your personal information is never shared with anyone.