

Steele County Humane Society Annual Membership Donation Form

Name: _____

Address: _____

City, State, Zip: _____

Membership Level (please select one):

_____ \$25

_____ \$50

_____ \$100

_____ \$250

_____ \$500

_____ Other

_____ **YES. I might like to donate more than once a year.**
Please send me another donation request in:

_____ 3 months

_____ 6 months

Steele County Humane Society

PO Box 220

Owatonna, MN 55060

507-451-4512