



I want to join the Allston Brighton CDC
in strengthening community in Allston Brighton!

I am enclosing a donation of:

\$35 \$50 \$75 \$100 \$200 \$500 Other \$ _____

(Contributions of \$35 or more include membership; limited-income membership is \$10)

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Please make checks payable to the *Allston Brighton CDC* and mail with this form to:

Allston Brighton CDC
20 Linden Street, Suite 288
Allston, MA 02134

Contributions to the Allston Brighton CDC are tax-deductible.
You will receive a confirmation of your donation for your tax purposes.

Thank you!

www.allstonbrightoncdc.org