



Please complete and mail to:  
Friends of Robinson Gardens  
1008 Elden Way  
Beverly Hills, CA 90210

# 2025 Friends of Robinson Gardens Membership

MEMBERSHIP STATUS:  Join       Renew

MEMBERSHIP LEVELS – All dues listed are for one year of membership (Jan 1 – Dec 31, 2025)

### BENEFITS FOR ALL MEMBERSHIP LEVELS:

- Two 2025 Garden Tour tickets (*a \$550 value*)
- Membership luncheon
- Invitations to all programs

### ROBINSON GARDENS FELLOW - \$1,750:

- All benefits of previous levels
  - Fellows Dinner
  - Invitations to exclusive events and tours
- \*\$1100 is tax deductible*

### ROBINSON GARDENS PATRON - \$2,500:

- All benefits of previous levels
  - Invitation to an exclusive evening event
- \*\$1850 is tax deductible*

### ROBINSON GARDENS BENEFACTOR - \$5,000:

- All benefits of previous levels
  - Invitation to two exclusive Benefactor events
- \*\$4350 is tax deductible*

### ROBINSON GARDENS ANGEL - \$10,000:

- All benefits of previous levels
  - Private Lunch for six at Virginia Robinson Gardens
- \*\$9350 is tax deductible*

## Member Information

Name: \_\_\_\_\_  
First Last (Nickname)

Birthday (MM/DD): \_\_\_\_\_ Spouse/Partner Name: \_\_\_\_\_  
First Last

Address: \_\_\_\_\_  
Street City State Zip Code

Home phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

The above information will be printed in our Membership Roster as provided. The Roster is used solely for the purposes of the Friends of Robinson Gardens. It is against Article 13 of the By-laws for any person to use the information contained therein for any other purpose.



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**Please select Friends' Membership Level:**

- Fellow: \$1,750
- Patron: \$2,500
- Benefactor: \$5,000
- Angel: \$10,000

**I would like to volunteer on the following committees this year:**

- Garden Tour Committee
- Patron Gala Committee
- Newsletter & Social Media Committee
- Children's Science Fair Committee
- Children's Science Program Committee

**ADDITIONAL DONATION**

\$ \_\_\_\_\_

**TOTAL AMOUNT OF PURCHASE**

\$ \_\_\_\_\_

- Check enclosed payable to Friends of Robinson Gardens
- Donor Advised Fund
- Credit/debit (complete below)

Name on Card \_\_\_\_\_

Card Number \_\_\_\_\_

Exp. Date (mm/yy) \_\_\_\_/\_\_\_\_

3-digit Security Code \_\_\_\_\_

I hereby authorize my credit card to be charged. By signing this form, I give FRG permission to charge my card.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date