THE WILDLIFE SOCIETY
CALIFORNIA NORTH COAST CHAPTER
MEMBERSHIP APPLICATION

NAME: _____
First M.I. Last

ADDRESS: _____

_____

PHONE: _____

E-MAIL ADDRESS: _____

PLACE OF EMPLOYMENT: _____

1. Can we send you e-mail messages concerning upcoming events yes no
2. Are you interested in:
   Becoming an officer ? . . . . . yes no
   Organizing events ? . . . . . yes no

3. What do you hope to get from Chapter membership?

_____
_____
_____
_____

Annual chapter dues (membership valid until the end of the calendar year): $10.00 / year. *
*Pre-pay 2 years and get the 3rd year free (3 year membership = $20)

Please make checks payable to **California North Coast Chapter, TWS**

Please Mail Checks to: **California North Coast Chapter, TWS, PO Box 5214, Arcata, CA 95518**

***** *FOR OFFICE USE ONLY* *****
Amount Paid: _____ Date Paid: _____ Expires: _____ Initials: _____