Wisconsin Chapter of The Wildlife Society

P.O. Box 863, Madison, WI 53701-0863
http://joomla.wildlife.org/Wisconsin

WCTWS ANNUAL MEMBERSHIP

_____ ___ _____

First Name M.I. Last Name

_____

Address

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City State Zip code

Telephone: Home: (____)_____ Work: (____)_____

E-mail: _____ _____

Note: please include an e-mail address so you can receive the Intelligent Tinkering newsletter in an electronic format.

An annual WCTWS membership (January – December) is $10.00

Please indicate the year you in which you are joining or renewing: _____

Mail this form along with a check for $10.00 (made payable to WCTWS) to:

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