

# Individual AWCF Membership Application

\_\_\_\_\_  
(First Name) (Initial) (Last Name)

- Mr. \_\_\_\_\_  
 Mrs. (Suffix)  
 Ms.  
 Dr.

\_\_\_\_\_  
(Job or Position Title, if any)

\_\_\_\_\_  
(Street Address) (P.O. Box)

This address is:

- Home  
 Business  
 Student/Temp

\_\_\_\_\_  
(City) (State) (Zip Code)

Personal Phone: \_\_\_\_\_  
(Area code) (Extension)

Business Phone: \_\_\_\_\_  
(Area code) (Extension)

\_\_\_\_\_  
(E-mail Address)

\_\_\_\_\_  
(Name of organization where I work, if any)

How I learned about the American Wildlife Conservation Foundation:

- From a current AWCF Member \_\_\_\_\_  
(Name)  
 Internet/Online  Brochure  Article  Other \_\_\_\_\_

Some skills/background that I have which may be of interest to the American Wildlife Conservation Foundation include (optional):

\_\_\_\_\_  
\_\_\_\_\_

**Annual membership dues:** Non-Professional and Student (\$10)  Professional (\$20)   
Optional \_\_\_\_\_  Please send checks (made out to **AWCF**) and this completed membership  
application to Dan Wentworth, Treasurer, AWCF, PO Box 231, Union Springs, NY 13160.

Questions? Contact any AWCF member.

- I am interested in learning more about donating to the AWCF Endowment. The American Wildlife Conservation Foundation, Inc. is 501 (C) (3) non-profit organization.