



MEMBERSHIP FORM

The **MVFN Membership Year** extends from April 1 to March 31 of the following calendar year. **New** memberships after January 1, will extend until March 31 of the following year.

RENEWAL NEW Membership How did you learn about our club? _____

Name/s: _____ Date: _____

Mailing Address: _____

*E-mail address(s): _____ Telephone: _____

*Details for MVFN program items and notices go out by e-mail. Your contact information will not be shared.

Membership Category : **Family** (includes couples or families) \$35

Individual \$25 **Senior** (65+) \$20 **Student** \$10

I also wish to make a donation of \$ _____ for the following:
(Donations of \$20 or more will be issued a receipt for Income Tax purposes, Registered charity #88173 6417 RR0001)

MVFN (general revenue/all programs) **Youth Environmental Education** **Young Naturalists**

Nature Bursary **Conservation & Habitat Programs** **Other** _____

Total Amount Enclosed: Cash _____ **Cheque** _____

Please make cheques payable to: **MVFN (Mississippi Valley Field Naturalists)** and send with this completed form to MVFN, P.O. Box 1617, Almonte ON, K0A 1A0; or bring to the next MVFN Nature Talk.

PLEASE indicate your interests (check or **add**): _____

<input type="checkbox"/> Nature Talks	<input type="checkbox"/> Outings/Field Trips	<input type="checkbox"/> Environmental Issues
<input type="checkbox"/> Youth Programs (EEP, YN)	<input type="checkbox"/> Serving on a Committee	<input type="checkbox"/> Birding
<input type="checkbox"/> Serving on the Board of Directors	<input type="checkbox"/> Serving on a Project	<input type="checkbox"/> Citizen Science (surveys, bioblitz)
<input type="checkbox"/> Paddling (canoeing, kayaking)	OTHER:	
I would be interested in: <input type="checkbox"/> Making a presentation <input type="checkbox"/> Leading an outing <input type="checkbox"/> Writing an article		

For additional information please visit <http://mvfn.ca/> or contact membership@mvfn.ca