

MEMBERSHIP APPLICATION

Name Address				
Business phone				
Mobile phone				
E-mail				
Membership (check one) :				
 □ Individual □ Senior (60+ years) □ Business/Organization 	\$15 \$10 \$25	□ Family□ Student□ Life	\$25 \$10 \$1,000	
Donations (check one):				
□ In honor of				
Acknowledgment for mem Name	ory/honor do	nation to be sent to:		
Full address				
Non-profit status:				
The Caddo Lake National Wi organization. Your gift is tax				

Checks:

Make checks payable to Friends of Caddo Lake National Wildlife Refuge

Mail:

Friends of Caddo Lake National Wildlife Refuge P.O. Box 230, Karnack, TX 75661 **Let us know** about your interests and abilities that relate to the activities of the Refuge (check all that apply) ...

Interests

Education (youth) Education (adults) Birding Fishing/Hunting Photography Publication/Website content Visitors Center Project/event committee Biological survey work
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 Habitat restoration Fundraising
Trails/wildlife observation
 Plants Other (specify)
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Abilities

- □ Computer skills
- □ Member Communication
- Fundraising
- □ Budget and finance
- □ Grant writing
- \Box Special events planning
- $\hfill\square$ Outdoor work projects
- □ Photography
- Art/graphic design
- Membership
- □ Leadership
- \Box Other (specify)

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