



The Sacramento-Shasta Chapter of The Wildlife Society

Registration Form for Annual Membership

Date _____

I am renewing my membership (or) I am a new member

Name: _____

Company/Organization/School: _____

Student? _____ Retired? _____ Yes I want to volunteer? _____

Address: _____

City: _____ State: _____ Zip: _____

Email address*: _____ Phone: _____

Make checks payable to the Sacramento Shasta Chapter of TWS, and mail to: TWS Sacramento Shasta Chapter, 1017 L Street PMB 245, Sacramento CA 95814

*All members receive copies of the chapter newsletter, *The Magpie* electronically. To receive it and announcements on upcoming activities, you must provide an email address.



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