

Sable Dunes Audubon Society
MEMBERSHIP APPLICATION

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

AMOUNT PAID _____ FOR DUES FOR YEAR 20 _____

_____ Yes, I would like my name, address, and telephone number to appear in the Sable Dunes Audubon Society Membership Directory. My email address will not be included.

_____ No, I do not wish to be listed in the Membership Directory.

Individual Membership: \$15.00
Family Membership: (included dependent children) \$25.00
Dues cover January to December.

Visit us at <https://www.sabledunesaudubon.org/>

Checks should be made to: Sable Dunes Audubon Society

MAIL APPLICATION AND DUES TO: Treasurer
Sable Dunes Audubon Society
Box 193, Pentwater, MI 49449