

Pennsylvania Taxidermist Association, Inc.

Membership Application Form

PLEASE CHECK ONE OF THE FOLLOWING!!

NEW PTA MEMBERSHIP

RENEWAL

Last Name _____ First Name _____ Spouse _____

Address _____

City _____ State _____ Zip _____

County _____ Business Name _____

Home Phone _____ Business Phone _____ Cell Phone _____

Email _____ Web Site _____

Licensed Taxidermist? Yes No PTA Certified Taxidermist? Yes No

MEMBERSHIP PLAN:

(Check One)

Single Membership - \$50.00

Family Membership - \$75.00

Life Membership - \$800.00**

DUES \$ _____

**Life membership may be paid in installments – but must be paid in full within 2 years.

Legal Fund Donation: \$5 \$10 \$25 \$50 No, Thanks \$ _____

Camp Compass Donation \$5 \$10 \$25 \$50 No, Thanks \$ _____

WEB-SITE LISTING: Please check one of the following:

Yes, I want included on the WEBSITE. No, I do not want included on the WEBSITE.

TOTAL DUES / DONATION ENCLOSED

\$

Make checks payable to: PA TAXIDERMIST ASSOCIATION & mail with form to: Dee Carley, 628 N. Fraley St., Kane, PA 16735
To pay with a credit card - call Dee Carley at 814-837-9309 or 814-366-0424