

# MICHIGAN TAXIDERMIST ASSOCIATION

## MEMBERSHIP APPLICATION

Date  /  /

New  Renewal

Name

Business Name

Address

City

County

State

Zip Code

Phone

Email

Website URL:



Annual Dues (membership Jan – Dec) \$40.00 (Now accepting Visa/MC)

Card Number  Exp Date  3 Digit Security Code

I would like to make a donation to the MTA's DreamMaker's Program \$

Spouse's Name:

Children (18 & Under – please list names and DOB's)

- a.
- b.
- c.
- d.
- e.
- f.

All information and upcoming events pertaining to our organization can be found at:  
[www.michigantaxidermist.com](http://www.michigantaxidermist.com) and Check us out on Facebook

Mail form to:  
Michigan Taxidermist Association  
c/o Membership Coordinator  
Kathy Proctor  
8425 Cronk Rd  
Litchfield, MI 49252

Email form to:  
Kathy Proctor  
kspagent51@gmail.com