New Hampshire Association of Natural Resource Scientists

PO Box 110 Concord NH 03302 603-224-0401

assistant@nhanrs.org



## **MEMBERSHIP APPLICATION FORM**

Name:			Date:			-
Membership	Category Selected:					
ACTIVE*						
	Regular	\$160.00				
	Senior (over 65 yrs old)	\$100.00	(First time	appliers: provide	photo of drivers	s license)
	Public Sector	\$ 80.00		roof of public sect ent must accomp		
AFFILIATE	_					
$\vdash$	Regular			professionals are	- ,	
	Public Sector	\$ 45.00		roof of public sect ent must accomp		
CONSERVATIO	N COMMISSION GROUP	\$ 30.00	•	s provide proof fr		-
				ommission memb kshop or event)	ersnip when regi	stering
STUDENT			jor <b>a w</b> orr	ishop or evenity		
		\$ 25.00	(Provide p	roof of current stu	ıdent status)	
membership req	ship (new) requires formal apuires a copy of the individual ms from current active NHAN	s NH Joint Board	Certification	(OR transcripts and	l resume) accomp	anied by
********	*************	*********	*******	*****	******	*****
SEND NHANRS	CORRESPONDENCE TO:	Home Add	ress 🔲 🛭	usiness Address	(check one)	
Company:		Co	unty:			
Business Addre	ess:					
City/Town:		State	e:	Zip:		
Home Address	:					
City/Town:		State	e:	Zip:		
Business Phone	e:	Home Pho	one:			
Cell Phone:		Email:				

[ Form continues on second page]

## **APPLICATION INFORMATION FOR ACTIVE MEMBERSHIP**

PROFESSIONAL DISCIPLIN	NE(S): (please check all	that apply)				
Wetland Science	Soil Science	Wildlife	Forestry			
the professional discipline applicants must provide t discipline for which you are disciplines, two Sponsor F	e(s) listed above, <u>or</u> tra two Sponsor Forms. <i>Sp</i> re applying. If you are Forms per discipline are Forms to the names yo	enscripts and their consors must be ac applying for member required. Please ou list below and a	.H. Joint Board Certification corresponding with resume. In addition, <u>all</u> Active Membership tive NHANRS members in the professional bership associated with multiple professional list the names of your Sponsors on the lines sk them to mail or email the forms to NHANRS are received!!			
Discipline 1:						
Discipline 2:						
Discipline 3:						
ADDITIONAL REQUESTED	INFORMATION: (plea	ase check all that ap	oply)			
N.H. Certified Wetland So	cientist: 🗌	N.H. Certi	ified Soil Scientist:			
Certified Wildlife Biologis	st®: 🗌	N.H. Licensed Forester:				
CPESC:		CESSWI:				
Please check if you are in	iterested in joining an	y of the following	committees:			
☐ Education ☐ Leg	gislative 🗌 Comm	unications	Membership			
Amount Enclosed:			\$			
			Check #:			
I certify that all materials	s submitted are true:					
			(Signature)			
	Please make	your check payab	le to NHANRS			
D	ues as outlined above ar	e effective for the Cl	JRRENT Membership Year			
ADDITIONAL REQUESTED  N.H. Certified Wetland So  Certified Wildlife Biologis  CPESC:   Please check if you are in  Education  Leg  Amount Enclosed:	st*:   nterested in joining and gislative Common Co	N.H. Certi N.H. Licer CESSWI:  y of the following of the	ified Soil Scientist:   nsed Forester:   committees:  Membership  \$  Check #:  (Signature)  Ile to NHANRS			

Because of lobbying activities, membership dues and gifts to NHANRS are not tax deductible as charitable contributions for Federal income tax purposes. However, they may be tax deductible under other provisions of the IRS code.