

COASTAL MASTER NATURALISTS ASSOCIATION

MEMBERSHIP APPLICATION

1. NAME: _____

2. ADDRESS: _____

3. E-MAIL: _____

4. PHONE: HOME: _____

MOBILE: _____

5. I COMPLETED MASTER NATURALIST TRAINING IN THE CLASS OF

6. I AM TRANSFERRING MY MEMBERSHIP FROM _____

THE ANNUAL MEMBERSHIP FEE IS \$15.00.

SIGNED _____

DATE _____

MAKE CHECK PAYABLE TO **COASTAL MASTER NATURALISTS ASSN.**

AND MAIL TO:

Mark Musselman

Audubon Center at Francis Beidler Forest

336 Sanctuary Rd.

Harleyville, SC 29448