

Please complete this form and mail, along with a check for \$15 (annual dues), to the following address:

**Mt. Shasta Area Audubon
PO Box 530
Mt. Shasta CA
96067**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email address : _____

Is this your first Audubon affiliation? _____ yes _____ no

Other club memberships or involvement:

Special interests or talents:

