



## Membership Application Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town/City/State: \_\_\_\_\_

Contact Number/s: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_

Reasons for joining **FALPS**: \_\_\_\_\_

### Volunteer Opportunities—please check activities that interest you:

Lead hikes;  Help with **FALPS**' Communications/publicity;  Assist with fundraising/membership;

Serve on Board of Directors;  Help plan events;  Trail Maintenance;  other

### Membership:

Single Membership, \$15

Family Membership, \$25, number of family members \_\_\_\_\_

To further advance the mission and vision of **FALPS**, I would like to donate \$ \_\_\_\_\_ .00

Please make check payable to **FALPS** and mail your membership form and check to:

**FALPS, PO Box 323, Pleasant Valley, CT 06063.**

I paid on the **FALPS**' website with PayPal.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Do you want to learn more about **FALPS**? Visit us on Facebook at *Friends of American Legion & Peoples State Forests-FALPS*, on our website <https://falps.org> or e-mail questions to [ctfalps@gmail.com](mailto:ctfalps@gmail.com).