Mid-Atlantic Turtle and Tortoise Society, Inc. Annual Membership Application



Check one:

New Application				
Annual Renewal			Today's date	
Name(s)				
Street Address				
City	State	e	Zip	
Phone	Email* (mand	Email* (mandatory)		
*MATTS will not share any contact information w	ith any other organiza	tion unless explicitly	y permitted in writing	
Please indicate what type of members	hip:			
Individual - \$25/yr.	Non-profit organizat		nization - \$40/yr.	
Family - \$40/yr.	Contributing member - \$50/yr.			
Do you have any skills or expe	rience you wo	uld like to sh	nare with MATTS?	
Comments/Questions/Concer	ns:			
/ vi D Love in al				
optional) Lam including a donation in the amount of S				

Mail completed application & check to:

MATTS Membership 2640 Pfefferkorn Road West Friendship, MD 21794