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



Check one:

New Application					
Annual Renewal			Ī	Today's date	
Name(s)			l		
Street Address					
		T.			
City		State	Z	Zip	
Phone	Email* ((mandatory)		
*MATTS will not share any contact information Please indicate what type of member.	-	organization unles	s explicitly p	ermitted in writing	
Individual - \$25/yr.		Non-profit organization - \$40/yr.			
Family - \$40/yr.	amily - \$40/yr. Contributin			member - \$50/yr.	
Do you have any skills or expe	erience yo	ou would lik	e to sha	re with MATTS?	
Comments/Questions/Concer	rns:				
(optional) I am inc	I am including a donation in the amount of \$				

Mail completed application & check to:

MATTS Membership P.O. Box 341 Highland, MD 20777