



Membership Form

Member Information

Member Name (Please Print): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Email Address will be used to send LAS Newsletter, membership renewals, and official event notifications.

Phone: _____

Membership Level (Please Select One)

Individual/Family (\$20/year) _____ Student/Senior (62+) (\$15/year) _____

Additional Donation (Please Select One. If Other, Specify Amount)

\$25 _____ \$50 _____ \$100 _____ \$500 _____ Other _____

Please make checks payable to Lahontan Audubon Society or LAS.

Mail Completed Form and Payment to:

Lahontan Audubon Society

Attn: Membership

P.O. Box 2304

Reno, NV 89505