



WAEE Individual & Family Membership Form

Date: _____ New Renewal

Please check one:

- Individual – One Year (\$35) Included is an additional donation to WAEE for \$ _____
- Retired/Student/Veteran (\$25)

Total Enclosed: \$ _____

WAEE is a non-profit, 501(c)(3) organization. Any donation is tax-deductible, and your WAEE membership dues may be tax-deductible. Consult your tax advisor.

MEMBER INFORMATION:

Name: _____

Organization: _____

Occupation: _____

Mailing Address: _____

City: _____ State: _____ Zip Code _____

Home Phone: _____ Work Phone: _____

I prefer to be contacted at Home Work

Email Address: _____

County: _____ Senate District: _____ Assembly District: _____

Interest Areas: Please identify the areas that best describe your niche in Environmental Education.

- Preschool Non-formal EE
- Elementary Grades Nature or Environmental Center
- Secondary Grades Agency
- Post-Secondary Grades Business and Industry
- Other:

Where did you hear about WAEE? _____

For office use only:

Date Rcv'd: _____

Access: _____

Quickbooks: _____

WA: _____

Receipt Sent: _____

PAYMENT INFORMATION: Please make check payable to WAEE

Credit Card: Visa Mastercard

Name on Card (please print clearly): _____

Credit Card Number*: _____ Expiration Date _____

Security #
CVV# _____ Billing Street Address: _____

Billing Zip Code: _____ Signature: _____

*Do not email this form with Credit Card information included
CREDIT CARD INFORMATION IS NOT KEPT ON FILE IN THE WAEE OFFICE