



### INPAWS Membership Application

New member  Renewal

Name(s) \_\_\_\_\_

Address \_\_\_\_\_ Home phone \_\_\_\_\_

City \_\_\_\_\_ Work phone \_\_\_\_\_

State/Zip+4 \_\_\_\_\_ Cell phone \_\_\_\_\_

County \_\_\_\_\_ E-mail \_\_\_\_\_

**Annual dues pertain to the fiscal year January 1 - December 31. Dues paid after September 1 are applied to the following fiscal year.**

**Student \$10**    **Individual \$25 / Household**    **School Group \$25**    **Patron \$100**    **Sponsor \$250**    **Benefactor \$500 /Corporate**

Memberships above Student and Individual / Household are most appreciated and can aid our mission. Donations are tax-deductible to the extent provided by law.

Additional Donation \$ \_\_\_\_\_   Donation to Letha's Fund \$ \_\_\_\_\_   Total Enclosed \$ \_\_\_\_\_

#### CHAPTERS:

State membership automatically enrolls you in a regional chapter based on the county in which you reside.

**North:** Adams, Allen, DeKalb, Elkhart, Huntington, Kosciusko, LaGrange, Lake, LaPorte, Marshal, Noble, Porter, Starke, Steuben, St. Joseph, Wabash, Wells, Whitley

**Central:** Blackford, Boone, Clay, Decatur, Delaware, Fayette, Franklin, Grant, Hamilton, Hancock, Hendricks, Henry, Howard, Jay, Johnson, Madison, Marion, Putnam, Randolph, Rush, Shelby, Tipton, Union, Vigo, Wayne

**South Central:** Bartholomew, Brown, Clark, Crawford, Daviess, Dearborn, Floyd, Greene, Harrison, Jackson, Jefferson, Jennings, Lawrence, Martin, Monroe, Morgan, Ohio, Orange, Owen, Posey, Ripley, Scott, Sullivan, Switzerland, Washington

**West Central:** Benton, Carroll, Cass, Clinton, Fountain, Fulton, Jasper, LaPorte, Lake, Marshall, Miami, Montgomery, Newton, Parke, Pulaski, Porter, Saint Joseph, Starke, Tippecanoe, Vermillion, Warren, White

**Southwest:** Dubois, Gibson, Knox, Perry, Pike, Posey, Spencer, Vanderburgh, Warrick

*I can help with:*

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Annual Conference      | <input type="checkbox"/> Historian                              | <input type="checkbox"/> Plant Sale/Auction          |
| <input type="checkbox"/> Book Sales             | <input type="checkbox"/> Invasive Plant Education               | <input type="checkbox"/> Public Outreach             |
| <input type="checkbox"/> Communications/Website | <input type="checkbox"/> Invasive Plant Removal                 | <input type="checkbox"/> Publicity/PR                |
| <input type="checkbox"/> Conservation Advocacy  | <input type="checkbox"/> Membership                             | <input type="checkbox"/> Speakers Bureau             |
| <input type="checkbox"/> Garden Tour            | <input type="checkbox"/> Native Plant Rescue                    | <input type="checkbox"/> Youth Outreach/Letha's Fund |
| <input type="checkbox"/> Grants/ Awards         | <input type="checkbox"/> Newsletter (quarterly <i>Journal</i> ) |  |
| <input type="checkbox"/> Hikes/Field Trips      |   |  |

Please print and fill in this form. Mail it, along with your check made payable to INPAWS, to **INPAWS, Attn: Membership, P.O. Box 501528, Indianapolis, IN 46250**