

MICHIGAN TAXIDERMIST ASSOCIATION
MEMBERSHIP APPLICATION

Name _____

Business Name _____

Address _____ City _____

County _____ State _____ Zip Code _____

Phone _____ Email _____

Website URL _____

New _____ Renewal _____ Date _____

Annual Dues: (membership Jan-Dec)

Single membership (\$35.00) _____ Family Membership (\$45.00) _____

Family Membership: Spouse: _____

Children (18 and under - please list names and DOB) a. _____

b. _____ c. _____ d. _____

e. _____ f. _____

The MTA Newsletter is currently our MTA Website. All information and upcoming events pertaining to our organization can be found at:
www.michigantaxidermist.com (Flyers are also mailed to our membership for all upcoming events)



Mail Application to:
Michigan Taxidermist Association
C/O Membership Coordinator
Pat Walker
15416 New Holland St.
Holland MI 49424