



## Wild Ones Membership Mail In Form

INSTRUCTIONS FOR USE: **Please print off completed form and include with your payment.**

Member Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

Email (required for membership): \_\_\_\_\_

Chapter Preference (if known): \_\_\_\_\_

New Membership

Renewing Membership

See <https://join.wildones.org/> for descriptions of membership levels and benefits.

Choose the level of membership you would like:	Wild	Wilder	Wildest
Household	\$40	\$60	\$100
Nonprofit	\$90	\$120	\$150
Business	\$250	\$600	\$1,200
Limited Income or Full-Time Student	\$25		
Lifetime	\$1500		

Membership total: \$ \_\_\_\_\_

Additional donation: \$ \_\_\_\_\_

Total enclosed: \$ \_\_\_\_\_

Mail application with check made out to Wild Ones:  
2285 West Butte des Morts Beach Road  
Neenah, WI 54956-1008

Questions? Contact us:  
[support@wildones.org](mailto:support@wildones.org) • 920-730-3986 • [wildones.org](https://wildones.org)