



Trap Pond Partners

MEMBERSHIP APPLICATION

Please Print

Name / Corporation: _____

Address: _____

City: _____

State: _____ Zip: _____

Annual Membership dues:

Senior* / Student Member:	\$5.00
Individual Member:	\$10.00
Family Member:	\$15.00
Corporate Member:	\$25.00
Donation:	\$ _____

Visit us at our next meeting or mail the application to:
Trap Pond Partners, Trap Pond State Park
Trap Pond Road
Laurel, Delaware 19956

Make Checks Payable to: Trap Pond Partners
*Seniors 62 years of age.