

Swift Creek Nature Club (SCNC) Membership Application

Name:			
Address:			
City:	State:	Zip:	
Phone (primary):		Cell:	
E-mail address:			
Membership type (check one) Individual (\$15.00) Family (\$30.00) Student (\$5.00)			
Volunteer Activities (Choose any ————————————————————————————————————	s ————————————————————————————————————	•	
Do you know that we have a ver let us know your involvement wir I am currently a SCNC F I plan to join the SCNC F I do not plan to join the S	th SCNC Face acebook grou acebook grou	up member	oup. Please
Signature		 Date	

The checks should be made out to Trisha Bullington and mailed to **Trisha Bullington**, **7421 Kousa Drive Chesterfield**, **VA 23832-2779**.

Please visit our website at https://blogs.longwood.edu/swiftcreeknatureclub/ for more information.

Disclaimer: All members and their families will participate in field trips, monthly programs and other club activities at their own risk.