



Cave Conservation and Management Section of the National Speleological Society Membership Form



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NSS # _____ Date you joined the Conservation & Management Section _____ Membership Paid Until (Office use only) _____ Membership Category (Office use only) _____

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Title (Mr, Ms, Dr, Mrs., Miss, etc.) _____ First Name _____ Middle _____ Last Name _____ Suffix (Jr, Sr, III, PhD., M.D., etc.) _____

Address Line 1

Address Line 2 (if needed)

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City _____ State _____ Zip _____

Country

Phone (Home)	
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Phone (Work)	
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Phone (Cell)	
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FAX	
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Primary E-mail	
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Alternate E-mail	
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Check one:

- I wish to receive the *Cave Conservationist* electronically via email -- \$ 5.00 dues.
- I wish to receive the *Cave Conservationist* on paper via regular mail -- \$ 10.00 dues.

Checks should be made payable to Cave Conservation and Management Section and sent with this form to:

Eugene Vale
46 Cedar Drive
Pacific, Missouri 63069-3414