



## Wisconsin Prescribed Fire Council Membership Form

[www.prescribedfire.org](http://www.prescribedfire.org)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Organization Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Dues: (check one)

- Student (\$20.00 for 4 years)
- Individual (\$20.00 annually)
- Individual Lifetime Member (\$250.00)
- Organization (\$100.00 annually)
- Supporting Member (\$250.00 annually)

(Check One)

- I give the Wisconsin Prescribed Fire Council permission to have my name listed as a member on WPFC publications.
- I wish to remain anonymous.

The council welcomes volunteers. If you are interested in participating in one of the council's committees, please check the committee(s) you are interested in:

- Education and Outreach
- Training
- Membership
- Government Relations
- Liability
- Implementation and Standards

Mail Completed Form to: Wisconsin Prescribed Fire Council c/o The Nature Conservancy, 633 West Main Street, Madison, WI 53703.