

## MEMBERSHIP APPLICATION

Fill in the active form by computer and print this page and mail it with your check after completion.



Mail to:

**THE LINNAEAN SOCIETY OF NEW YORK**  
**P.O. Box 4121**  
**New York, NY 10163-4121**

Name:

Street Address:

Apt./Suite:

City, State, Zip:

Telephone:

Email:

Sponsored by:

*See note at bottom of page.*

**I am interested in joining at the following level:**

\$45.00 = Active Member

\$100.00 = Supporting Member

\$30.00 = Associate Member:

Is for persons living more than 50 miles from the American Museum of Natural History in New York City (except foreign applicants) or for full-time students.

\$800.00 = Life Member

May be paid in four annual installments.

Signature:

Date:

*Please note:*

Before being considered for membership, our Constitution requires that each new applicant must be sponsored by a current member of the Society. If you do not know members of the Society already, you can meet some of us at our meetings or on field trips. We will be happy to sponsor you for membership.