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## **INVOICE for ANNUAL DUES**

**Please pay your dues by March 31st**

Please complete the form below with all relevant details. This information will be printed in the CTPA *Membership Directory* exactly as you enter it below.

Last Name: Suffix:

First Name:

Email:

Address:

Town:

State: Zip:

Home Phone: Work Phone:

Cell Phone: Fax:

Company/Organization:

Website:

Arborist license #:

**Amount Owed for Dues:**

 Regular Member $55

 65 or Older $25

Please consider including a voluntary donation to the Oscar P Stone Research Trust Fund (for undergraduates scholarships) or the Dr Mark S McClure Research Fund (for graduate and post graduate students). All donations will be greatly appreciated. Include your donation in your dues check or as a separate check payable to CTPA. Please indicate which fund you wish your donation to go towards. Thank you.

**Donation:** Oscar P Stone $ Dr. Mark S McClure $

Please make our your check in the appropriate amount to CTPA and mail it to:

# CTPA

# PO Box 1946

# Wallingford, Connecticut 06492

203 484-2512

You can also **pay your dues online** at www.CTPA.org/renew-membership-dues