



INVOICE for ANNUAL DUES

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

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Arborist license #:

Amount Owed for Dues:

Regular Member \$65.00 _____

65 or Older \$35.00 _____

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 checks 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