

Membership Application

The Aquatic Plant Management Society, Inc.
7922 NW 71st Street
Gainesville, FL 32653-3071
Fax: 352-392-3462



Name:

Organization:

Address 1:

Address 2:

City:

State:

Zip:

Telephone:

Fax:

Email:

Check Your Desired Membership Level:

Individual \$95

Student \$20

Sustaining \$500

Check

Visa

Mastercard

American Express

Card No:

Exp Date:

Signature _____

Please submit this form with your credit card information or check payable to the Aquatic Plant Management Society, Inc. to the address above.