

FRIENDS OF THE UNIVERSITY OF MICHIGAN MUSEUM OF PALEONTOLOGY

Application for Membership



The undersigned hereby applies for membership in the Friends of the University of Michigan Museum of Paleontology whose sole purpose is to support financially and otherwise the activities of the University of Michigan Museum of Paleontology. If elected, I undertake to contribute dues annually as stated below:

Regular: \$ 20.00

Name _____

Address _____

City, State, Zip Code _____

Telephone: _____

Email Address: _____

Date: _____

Sponsor: _____

A copy of the By-Laws of the Friends will be sent with membership notification.