

Membership Application

Mail: SAF, 5400 Grosvenor Lane, Bethesda, MD 20814-2198

TOLL-FREE: (866) 897-8720 Phone: (301) 897-8720 Fax: (301) 897-3690 www.eforester.org

1. Contact Information (please print)

First Name _____ Preferred Name _____ M.I. ____ Last _____

Address _____ Apt. No. _____

City _____ State _____ Zip _____

Permanent Address (if different from above) _____ Apt. No. _____

City _____ State _____ Zip _____

E-mail (Required) _____ (used only for SAF business)

Home { _____ } _____ Work { _____ } _____

Cell { _____ } _____ Fax { _____ } _____

2. College Education

Degree Earned or Pursuing

____ Associate ____ Bachelor ____ Masters ____ Doctorate

Year the Degree Earned or Anticipated: _____

Major _____

Name of College/University Attended _____

3. Current Employer

Employer _____

Position/Title _____

4. Field Experience

____ Three or more years experience ____ Less than three years of experience

5. Demographic Information (internal use only)

Current Employer

____ College or University ____ Federal Government ____ Consultant

____ Not-for-Profit/NGO ____ State/Local Government ____ Student

____ Private Industry ____ TIMO/REIT ____ Retired

____ Other _____

Current Position

____ Field Forestry ____ Management/Administration ____ Retired

____ Resource Manager ____ Staff Specialist ____ Owner

____ Researcher/Educator ____ Student

____ Other _____

Date of Birth ____/____/____

Gender: ____ Male ____ Female

Ethnic Background

____ White/Caucasian ____ Black/African American

____ American Indian/Alaska ____ Native Hispanic/Latino

____ Native Hawaiian/Other Pacific Islander ____ Asian

____ Other _____ ____ Prefer not to say

6. How Did You Hear About SAF?

____ Mailing ____ Event ____ Website ____ Publication ____ School ____ E-mail

7. Signature

This information is, to the best of my knowledge, accurate and complete.

I agree to abide by the SAF Code of Ethics.

Applicant Signature _____ Date _____

8. Membership Level

To receive discounted membership rates, provide your sponsor's name or SAF ID _____

Student Member – \$40 \$ _____

Silver Member – \$95 (\$66.50 with sponsor) \$ _____

Gold Member – \$145 (\$101.50 with sponsor) \$ _____

Gold (Graduated in past 5 years – \$95)(\$66.50 with sponsor) \$ _____

Platinum Member – \$240 (\$168 with sponsor) \$ _____

Optional Local Membership (non-student) – \$22 \$ _____

International Membership add \$50 postage surcharge \$ _____

9. Optional Subscriptions to add to Your Service Level

Forest Science (bi-monthly)

Print and Online \$196 US / Canada \$287 International \$ _____

Online Only (FREE with Gold or Platinum Membership) \$ _____

Total Charge: \$ _____

10. Payment Method

____ Check Enclosed ____ MC ____ Visa ____ AMEX ____ Discover

Card No. _____

Exp. Date ____ Signature _____

Billing address for card if different than above Contact Infomraiton----

Address _____

City _____ State _____ Zip _____