



Membership Application

Date: _____

Renewal New Member - How did you hear about CPS? _____

Name _____
(For family membership, please include family members' names.)

Street Address _____

City _____ State _____ Zip Code _____

Telephone _____ Email _____

What species of parrot(s) do you have? _____

Do you have any special skills you would like to share with CPS (computer, legal, photography, fundraising, marketing, art, or other)? _____

Are you interested in volunteering for CPS? _____

Membership Fees:

Individual membership (one adult): \$25.00

Family membership (2 adults/children): \$30.00

- Memberships run from January 1 to December 31. (Memberships for new members joining on or after September 1 will expire December of the following year.)

Newsletters and Announcements (sent by email to membership):

Yes, I wish to receive newsletters and announcements by email.

Payment Choices:

1. By check to Connecticut Parrot Society, P.O. Box 488, Middletown, CT 06457
2. PayPal on the CPS website at www.connecticutparrotsociety.org