

Chitina Dipnetters Association

Mail-in Membership Form

This is a: *new membership* *membership renewal* *change of address*

Name: _____

Address: _____

City: _____ State: _____ ZIPCode: _____

Phone: (_____) _____

Email Address: _____

Years Dipnetting: _____ *(optional)*

Years in Alaska: _____ *(optional)*

Print and mail this application with a \$20 check to:

Chitina Dipnetters Association
PO Box 72665
Fairbanks, AK 99707

Or join online at <http://chitinadipnetters.com>