



**Wisconsin Falconers Association
Membership Application Form
Membership Year 2024**

Member Information:

Name: _____

Address: _____

City: _____ St _____ Zip Code: _____

County: _____

Home Phone: _____ Cell Phone: _____

E-Mail: _____

Membership Category - Check one:

____\$20.00 **Regular Member** (Licensed WI Falconer)

Permit Level: ___Apprentice ___General ___Master

____\$20.00 **Associate Member** (Unlicensed WI Resident and Out-of-State Licensed or Unlicensed Falconer)

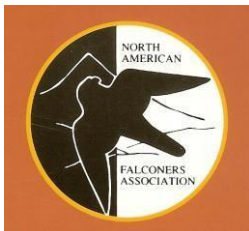
If Out-of-State Licensed Falconer, indicate permit level:

Permit Level: ___Apprentice ___General ___

Master

If you are a licensed WI General or Master Falconer willing to consider sponsoring an apprentice, please indicate here (circle one): **yes no**

Your name will be forwarded to Abby Krumrie, Apprentice Coordinator.



Have you joined NAFA? If not, here is the website: www.n-a-f-a.org

**Return completed form and dues to:
Made payable to WFA**

Tim Hitzman
Treasurer – WFA
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Appleton, WI 54914
thitzman60@gmail.com