



**Wisconsin Falconers Association
Membership Application Form
Membership Year 2020**

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

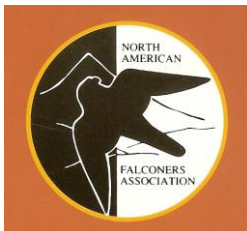
____ \$20.00 **Associate Member** (Unlicensed WI Resident and Out-of-State Licensed or Unlicensed Falconer)

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 Frank Ujzdowski, 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**

Hillary Neff
Treasurer – WFA
1701 Frisch Rd
Madison, WI 53711
hillneff@gmail.com