



OAKLAND BIRD ALLIANCE MEMBERSHIP FORM



Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: (____) _____
 Mobile: (____) _____
 Email address: _____

Please indicate with an (X) in the box any personal information above you do not want listed in the OBA membership directory.

Check also if you are a member of:

____ National Audubon Society
 ____ Michigan Audubon Society

OBA needs and welcomes volunteers — please participate if you can!

Check if you have the skills to help:

____ Become a board member
 ____ Lead a field trip or present a program
 ____ Fill an open position (Position: _____)

Check appropriate line:

____ Member renewal
 ____ New member
 ____ Change of address

Membership Fees

- Individual \$15
- Family \$20
- Contributing \$25
- Supporting \$50
- Benefactor \$100

Please make checks payable to:

OAKLAND BIRD ALLIANCE

Mail to:

OBA MEMBERSHIP

C/O ROBERT MOLL

PO BOX 796

BIRMINGHAM, MICHIGAN 48012-0796

*Oakland Audubon Society (doing business as Oakland Bird Alliance) is a 501(c)(3) organization.
 Your donation is 100% tax deductible to the extent allowed by law.*