NORTH DAKOTA ASSOCIATION OF EXTENSION 4-H YOUTH WORKERS

2009-2010 Membership Form

NAME _____

TITLE _____

OFFICE ADDRESS _____

COUNTY_____

CITY_____ **STATE**_____ **ZIP** _____

PHONE _____ **FAX**_____

EMAIL _____

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TYPE of MEMBERSHIP

Check one:

_____ **$ 80** State & National Membership Dues

_____ **$ 10** State Association Dues
(Only available for staff that are less than 50% time.)

_____ **$210** Life Membership
(Available to former members upon retirement.)

_____ **$ 45.00** NEW MEMBERS ONLY! *(National dues are only $35.00 your first year and state dues are $10.00.)*

Please make checks payable to **NDAE4-HYW** and send to **TREASURER**:

Brian Zimprich
Ransom County Extension Agent
P.O. Box 950
Lisbon, ND 58054