

MEMBERSHIP APPLICATION

Mail: Society of American Foresters, 10100 Laureate Way, Bethesda, MD 20814 TOLL-FREE: (866) 897.8720 Phone: (301) 897.8720 Fax: (301) 897.3690 www.eforester.org

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			State	Zip
E-mail (required)			1	
Home ()				
Cell ()		Fax (J	
2. Education (required)			Code of Ethics (www.eforester.org/CodeOfEthics)	
Highest Degree Earned			This information is, to the best of my knowledge, accur	ate and complete.
☐ Associate ☐ Bac	helor	ers 🖵 Doctorate	I agree to abide by the SAF Code of Ethics and agree to	support the
Date Earned/	/	Major	organization's effort to grow the profession.	
Degree Pursuing (if currer	ntly a student)		Applicant Signature	
☐ Associate ☐ Bachelor ☐ Masters ☐ Doctorate			Date/	
Anticipated Graduation Date/			mere goarerenea by arrow member.	
College/University				
Major				
3. Employer			Member Number (optional)	
Employer				
Position/Title			Student – \$40 (full time student) \$	
4. Demographic (internal use only)			Transitional – \$95 (five years post-graduation)	\$
Current Employer	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Full _ \$115 (professional)	\$
☐ College or University	☐ Federal Governr	nent 🖵 Consultant		
□ Not-for-Profit/NG0	☐ State/Local Gov			
☐ Private Industry	☐ TIMO/REIT	☐ Retired		
☐ Other			Local Membership — \$22 (non-student)	\$
Current Position				
☐ Field Forestry ☐ Mar	nagement/Administrat	ion 🖵 Retired	То	tal Charge: \$
☐ Resource Manager	☐ Staff Specialist	☐ Owner		
☐ Researcher/Educator	☐ Student	□ Other		
Date of Birth/				
Gender				
☐ Male ☐ Female				
Ethnic Background			8. Payment	
☐ White/Caucasian ☐ Black/African American			☐ Check Enclosed ☐ MC ☐ Visa ☐ AME	EX Discover
☐ American Indian/Alaska	☐ Native Hispanic	/Latino	Card No	
☐ Native Hawaiian/Other Pacific Islander ☐ Asian		☐ Asian	Exp. Date/	
☐ Other ☐ Prefer not to say		Signature		

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