



ROCKINGHAM BIRD CLUB

Membership application

Name: _____

Address: _____

City: _____

State, Zip: _____

Phone number: _____

E-Mail: _____

Please choose a membership category and/or item:

_____ **Sustaining:** \$100

_____ **Contributing:** \$50

_____ **Family:** \$20

_____ **Individual:** \$15

_____ ***The Birds of Rockingham County***, a Field Checklist: \$15

_____ **Embroidered RBC patch:** \$5

Please choose a membership option:

_____ **New member**

_____ **Renewing member**

We are only accepting checks at this time. Please mail the appropriate amount to the address below:

Rockingham Bird Club, Inc.

949 Northfield Ct.

Harrisonburg, VA 22802