

Membership Application

to join

Osprey Watch of Southeast Michigan

**Dedicated to restoring a thriving Osprey
population in Southeastern Michigan**



Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

Membership Level

Individual: _____
(\$10.00/year)

Family: _____
(\$15.00/year)

Osprey Sponsor: _____
(\$40.00/year)

I am interested in helping with the following activities

Education _____

Field Observations _____

Public Relations _____

Special Events _____

Maintenance _____

Membership _____

Other _____

Please mail your completed application
along with your personal check or
money order, payable to OWSEM, to:

Kathy Kortge, Membership Chair
PO Box 108
Fenton, MI 48430-0108

OWSEM Members receive:

- *Opportunities to be personally involved in Osprey conservation efforts*
- *Notification of special Membership Activities*
- *E-mail alerts of current osprey activity*