FES Membership/Renewal Application

Send application and payment to: Florida Entomological Society, P.O. Box 1007, Lutz, FL 33548-1007 (PH: 813-903-9234) email: flaentsoc@gmail.com

Please enroll me as a: _______New Member _______Renewing Member

Since January 1, 2022, the Florida Entomologist journal has been published in electronic form but not in print

First name[s] (given Name[s]) Last Name[s] (family name[s] or surname[s])
Address1: ___________________________ Phone: ___________________ Fax: ______________
Address2: ___________________________ E:mail ___________________________
City ___________________________ State: ___________ Zip/Postal Code: __________
Country: ___________________________ Area of Interest: _______________________

Please indicate type of membership: Rates effective 11/6/22

Student membership (verification is required) $48.00
Full Membership $70.00
Corporate Membership $265.00
Sustaining Membership $160.00

Tax-deductible donation for: Student awards/travel $____
Other $____
Unrestricted $____

Total enclosed $______ all form of funds must be made in US dollars and drawn on a US bank.

Visa/MasterCard (only) accepted: Credit Card type: ______ Card# ___________________
Exp. Date: _______ CV Code: __________

Mailing address of Credit Card with zip code: ___________________________