

Western Arkansas Master Naturalists

325 N 46th St; Van Buren, AR 72956

If you have questions, feel free to call Penny Harris at 479-719-8444! Thanks!

Membership Application

Thanks for your interest in the Western Arkansas Master Naturalist training program. Spaces are limited and will be filled in the order applications and payments are received.

Please type or print clearly and return your application and a check for \$165 made payable to WAMN, to the address above. This fee includes training expenses of \$135 and \$30 annual dues through December 31, 2017.

| Name: | | | | | |
|------------------------------|----------------------------------|------------------------|-------------------|--|--|
| Name as you wish it to ap | pear on your name tag: | | | | |
| Address: | City: | | Zip: | | |
| Home Phone: | Cell Phone: | Do you text?: | | | |
| Email Address: | | T-Shirt Size: | S M L XL 2XL 3XL | | |
| How did you learn about t | he Arkansas Master Naturalist pr | ogram? | | | |
| Occupation (If retired, for | mer occupation): | | | | |
| Please describe your inte | rest in the Arkansas Master Natu | ralist program: | | | |
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| | | | | | |
| Please list any organization | ons you are a member of or have | volunteered with in th | e last two years: | | |
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| Please note skills and interests that could be beneficial to the Arkansas Master Naturalist program. | |
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| Skills may include computers, photography, secretarial, graphic arts, public speaking, specific | |
| nowledge, etc. Please include any training or education you have relative to Arkansas, its natural | |
| esources, or the outdoors. | |
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Master Naturalists are currently involved in the following activities. Please rate your interest in each activity.

| | (Circle one) | High | Medium | Low | None |
|------------------------------|---------------------------|------|--------|-----|------|
| Education/Public Information | Trail Guide/Interpreter | Н | М | L | N |
| | Children's Programs | Н | M | L | N |
| Field Research/Surveys | Stream Team | н | М | L | N |
| | Plant and Wildlife Census | Н | M | L | N |
| | Native Plant ID | Н | M | L | N |
| Outdoor Labor | Trail Construction | Н | М | L | N |
| | Greenhouse | Н | M | L | N |
| | Outdoor Projects | Н | M | L | N |
| Administration | Board Officer | Н | М | L | N |
| | Committee Chair | Н | M | L | N |
| | Record Keeping | Н | M | L | N |
| | Newsletter/Website | Н | M | L | N |

The Arkansas Master Naturalist program is a volunteer organization dedicated to educating its members and giving back to the community through volunteer work. In order to be an active, Certified Master Naturalist you must commit to provide 40 hours of volunteer service in the community, acquire 8 hours of continuing education training, and pay \$30.00 in annual dues.

| By signing my name | below I am stating | that I am at le | east 18 years of a | ge, understand the | premise of |
|---------------------|--------------------|-----------------|--------------------|---------------------|-------------|
| the Arkansas Master | Naturalist program | , and intend to | o become an activ | e, Certified Master | Naturalist. |

| Signature | Date |
|-----------|----------|

For more information about our program, our mission and our activities, please visit our website at http://wordpress.ArkansasMasterNaturalists.org