

# **MONTANA GEOLOGICAL SOCIETY**

P.O. Box 844

Billings, MT 59103

## **Membership Application**

**Last Name** \_\_\_\_\_

**First Name** \_\_\_\_\_ **Middle Initial** \_\_\_\_\_

**Company/Affiliation** \_\_\_\_\_

**Preferred Mailing Address – Work or Home**

**Mailing Address – Street** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Work Phone** \_\_\_\_\_ **Home Phone** \_\_\_\_\_

**E-Mail Address** \_\_\_\_\_

**Membership Requested – Regular or Student**

**AAPG Member – YES or NO**

**Education (School, Degree, Year)**

**Degree #1** \_\_\_\_\_

**Degree #2** \_\_\_\_\_

**Degree #3** \_\_\_\_\_

**ANNUAL DUES: \$20.00 Regular ; \$10.00 Student.**