



Your Local Resource For Natural Resources Since 1938

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REGISTRATION FORM

West Michigan Shoreline Naturalist Program

Name: _____

Address: _____

City, ST ZIP: _____

E-Mail Address: _____

Phone Number: _____

_____ Full payment by **September 1, 2009** -- The Program fee is reduced to \$175.00.

--- OR ---

_____ Partial payment of \$100.00 due by **September 1, 2009** with the Balance of \$95.00 due by **December 1, 2009**

Make checks payable to: **Muskegon Conservation District**

Mail to: Muskegon Conservation District
ATTN: Jeff Auch
940 N. Van Eyck Street
Muskegon, MI 49442

Please add the note "**Naturalist Program**" on the memo line of the check.

Thank you for your interest in this Naturalist Program.

Your Land, Your Water, Your Michigan!