



MEMBERSHIP APPLICATION

Name _____
—
Address _____
—
City _____ State _____ Zip _____
Phone _____ NETRA # _____
AMA # _____ AMA Expiration _____
Date _____
Email _____
—

Your PSTR membership covers your spouse and any family members under the age of 18. Please list below any family members you wish to have included.

Name_ _____ Age_ _____ Email_ _____
Name_ _____ Age_ _____
_____ Email_ _____
Name_ _____ Age_ _____
_____ Email_ _____
Name_ _____ Age_ _____
_____ Email_ _____

Send application and \$40 dues to:

Patti Laranjo
17 Meadow Street

Taunton, MA 02780

Please make checks payable to **PSTR**.

Once we receive your payment we will send you your PSTR membership card and window decal. You are encouraged to attend our meetings which are held on the 1st and 3rd Tuesday of each month at the Upland Sportsman Club on Upland Road in Plympton, MA; starting at 7 pm.