



**NORTH AMERICAN
MYCOLOGICAL ASSOCIATION**
Promoting, pursuing and advancing the science of mycology

Membership Application

Check one: New member Renewing member

Name(s) _____
Street Address _____
City/State/Zip+4 _____
Phone _____
Email _____

Membership plans (includes emailed issues of *The Mycophile*).

Dues must be paid in US Dollars:

\$25 for Individual/Household - member of NAMA affiliated club

Please include club name: _____

\$30 for Individual/Household - unaffiliated

\$30 for members outside North America

\$15 for full time students (state your school)

School name: _____

\$60 or more for a Sustaining Membership

\$500 for a Life Membership

NAMA members can separately purchase black & white print issues of *The Mycophile* by mail:

\$15 for add one year subscription to *The Mycophile*

Send check payable to NAMA to:

Christy Aiello (Ecsedy)
NAMA Membership Secretary
2647 Berlin Farm Road
Export, PA 15632

I would be interested in making a donation to fund educational activities. Please contact me.

I am interested in participating in the following activities:

**If you have questions about this application, contact NAMA Membership Secretary
Christy Aiello at Christy.ecsedy@gmail.com or membership@namyco.org**