



**AIR & WASTE MANAGEMENT
A S S O C I A T I O N**

◆
Golden Empire Chapter

CHAPTER MEMBERSHIP FORM

Date: _____
Name: _____
Affiliation: _____
Address: _____
City, State, & Zip: _____
Telephone: _____ e-mail: _____

TYPE OF MEMBERSHIP (Check One):

Regular Member (\$15/year): _____ Student Member (\$5/year): _____

COMMITTEE/CHAPTER INTERESTS:

- Membership
- Education
- Technical Conference
- Awards
- Board of Directors

Send this completed form plus your check made payable to *A&WMA-Golden Empire Chapter* to:

A&WMA-Golden Empire Chapter
P.O. Box 12184
Bakersfield, CA 93389

OR

BRING IT TO OUR NEXT MEETING!!!