

GCBC Membership/Registration Form



Date: _____

Name: _____

Address: _____

City: _____

State: _____ Zip _____

Phone: _____

e-mail: _____

Would you be interested in volunteering?

yes no

How did you hear about our bird club?

Currently have birds?

If so list? _____

New Member? Renewal?

Dues: \$25.00 for household

\$20.00 for single membership

Membership is from Feb 1st thru Jan 31st.

Send your check to:

**G.C.B.C.
P.O. Box 40472
Cincinnati, OH 45240.**