



NEW YORK STATE TRAPPER'S Association

Membership Application

New _____ Renewal _____

Name (please print legibly) _____

Street - RFD - Box _____

Town or City _____ State _____

County _____ NYSTA Region _____ Zip _____

Phone No. _____ E-Mail _____

Date of Birth ____/____/____ (required)

[Website: Nystrappers.org](http://www.Nystrappers.org)

Unless otherwise indicated, memberships include publications, (*The Trappers Post*, & **TRAPLINES NEWSLETTER**), and **one** vote.



Junior Membership	\$25.00/yr. _____	Under 16 years of age, publications included
Basic Membership	\$25.00/yr. _____	Over 16 years of age: no Trappers Post , only the newsletter
General Membership	\$35.00/yr. _____	Over 16 years of age: publications included
Family Membership	\$40.00/yr. _____	Two family members: Two votes and one set of publications included
Lifetime Membership	\$750.00 _____	Plaque, special members credentials, publications included,
Basic Lifetime Membership	\$300.00 _____	Plaque, special members credentials, no Trappers Post , only the newsletter

Your extra donation will help NYSTA to preserve
trapping in NYS; _____

Payment can be made online. Total _____

Thank you for becoming a member of NYSTA!

Make checks out to: NYS Trappers Association

Mail to: NYSTA Trappers Association:
Bob Samuelson
3889 Westside Drive
Churchville, New York 14428