YOU ARE INVITED TO JOIN THE OHIO LEPIDOPTERISTS!

Name: _________________________  Date: __________________

Address: ______________________________________________

_____________________________________________________________________

Telephone: Home: ___________  Work: ___________

Fax: ____________________

E-mail: ________________________________________________

Membership Dues:

- Sustaining: ($20.00 or more per calendar year) ___
- Single/Family: ($15.00 per calendar year) ___
- Full Time Student: ($5.00 per calendar year) ___

Name of School: __________________________

Please enclose a check for the correct amount. Checks should be made out to: The Ohio Lepidopterists. Send to:

Don Reuter
274 Westview Ave.
Columbus, OH 43214-1428
USA

Interests:

- Biology of plants/animals, nature study __________
- Butterflies and Skippers ______________________
- Butterfly Gardening _________________________
- Collecting ____________________________________
- Collections _________________________________
- Conservation/Preservation issues ______________
- Ecology _____________________________________
- Lepidoptera, all _____________________________
- Monarch butterflies __________________________
- Moths ______________________________________
- Photography ________________________________
- Rearing, raising _____________________________
- Other _______________________________________

This form downloaded from www.ohiolepidopterists.org 2003