

WGA MEMBERSHIP/ANNUAL RENEWAL APPLICATION
January 1 to December 31, Current Year

Please fill out this application and MAIL PAYMENT to: WGA, PO Box 545,
Casper, WY 82602

Name: _____ Nickname: _____
Company: _____ Spouse's Name: _____
Position: _____ Email: _____
Address (Home Office) : _____
City: _____ State: _____ Zip: _____ Phone: _____

Independent or Consulting Geologist? Circle Yes No

Education: (School, Year, Degree, and Major)

Education: _____
Education: _____
Education: _____

Professional Affiliations:

AAPG: _____ RMAG: _____
SME: _____ SPE: _____
Other: _____

Professional Certification Number:

Wyoming PG: _____
AAPG: _____
AIPG: _____
Other: _____

Membership Type:

Full (\$40.00) Associate (\$40.00) Student (\$10.00) Honorary (No Dues)

\$ _____ Dues (includes membership directory)
\$ _____ Casper College Memorial Scholarship Fund (Tax Deductible)
\$ _____ J. David Love Fellowship Fund (Tax Deductible)
\$ _____ Steve Champlin Scholarship Fund (Tax Deductible)
\$ _____ WGA Endowment Fund (Tax Deductible)
\$ _____ Wold Youth Fellowship (K-12, Education) (Tax Deductible)
\$ _____ Gene George Memorial Scholarship (Tax Deductible)
\$ _____ Total Enclosed Check# _____

Credit Card# _____ Exp. Date _____ Please circle: VISA/MC/DS

Transaction Fee with credit card charges