FSHEA Application Form

NAME		
OPTIONAL HOME ADDRESS		
EMPLOYMENT STATUS:	ETHNICITY:(Optional)	
() TEMPORARY/STUDENT	() HISPANIC	
() PERMANENT/PERM. PART TIME	() OTHER	
() RETIRED		
TYPE OF MEMBERSHIP		
() MEMBER (FS employees)	() ASSOCIATE MEMBER (non-FS Employees)	
ARE YOU INTERESTED IN BEING LISTE () YES () NO	D IN THE FSHEA DIRECTORY?	
MAIL APPLICATION WITH \$20 DUES (CHECK, PAYABLE TO	

MAIL APPLICATION WITH \$20 DUES CHECK, PAYABLE TO FSHEA, TO:

USDA Forest Service Rocky Mountain Research Station Director, Civil Rights Attn: Angela Baca 2150 Centre Avenue, Building A Fort Collins, CO 80526