



## MEMBERSHIP FORM

Organization: Prairie Smoke

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address : \_\_\_\_\_

*(Email address will only be used for reminders about field trips, prescribed burning workshops, prescribed burning opportunities, annual picnic, and other special events.)*

\_\_\_\_\_ \$25 Annual Membership (covers an individual, couple, or family)

\_\_\_\_\_ Additional Contribution to Prairie Smoke  
*(all additional contributions are tax deductible)*

\_\_\_\_\_ Total Enclosed

\*Please enclose this form, the completed survey below, and a check made out to "Prairie Smoke". Send to Prairie Smoke, P.O. Box 1312, Eyota, MN 55934.

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### **I am interested in... (check all that apply)**

- \_\_\_\_\_ Going on field trips
- \_\_\_\_\_ Leading field trips
- \_\_\_\_\_ Seed collecting work days
- \_\_\_\_\_ Brush clearing work days
- \_\_\_\_\_ Attending a prescribed burning workshop
- \_\_\_\_\_ Prescribed burning on my property
- \_\_\_\_\_ Volunteering to be on prescribed burning crew for other properties
- \_\_\_\_\_ Attending a basic or advanced plant ID session
- \_\_\_\_\_ Learning more about prairie/savanna restoration techniques
- \_\_\_\_\_ Creating educational materials/exhibits
- \_\_\_\_\_ Writing for the newsletter/website
- \_\_\_\_\_ Helping to staff the Prairie Smoke booth at local events
- \_\_\_\_\_ Helping with special events (annual picnic, potluck, conference)
- \_\_\_\_\_ Learning about chainsaw and brush saw safety and operation
- \_\_\_\_\_ Learning more about invasive species control (buckthorn, honeysuckle...)
- \_\_\_\_\_ Learning more about using chemicals to control invasive species
- \_\_\_\_\_ Learning more about \_\_\_\_\_