



Quad Cities Parrot Society

Membership Application

_____ New Application _____ Former Member/renewal

Name:

Address:

Phone:

Optional Cell:

Optional Work:

Email:

Are you a Pet owner? If yes, What kind of pets do you own?

Are you a Breeder? If Yes, What do you specialize in?

Would you have an interest in fostering birds that come into the club as rescues?

Are you a member of any other Clubs of Similar Interest?

If you would like this to be a Family Membership please list your additional family members:.

How did you hear about our club?

Applicant Signature : _____ Date: _____

Dues run from May 1 for 1 year. The total is \$25.00 per year. All Members renew their dues on May 1st. Please use the scale below for the Full or Partial year dues.

If remitting between May 1 - Oct 31 \$25.00

If remitting between Nov 1 - Apr 30 \$15.00

Mail address: QCPS
PO BOX 3117
Clinton Ia 52732