



PAWS of NE Louisiana

P. O. Box 15432
Monroe, LA 71207

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www.pawsnela.org
318.397.0007

New Membership Form

Name _____

Address _____

City/State/Zip _____

Email _____ **Phone** _____

1) Membership Levels (please select one):

- ____ Student or Senior \$18.00/year
 - ____ Individual \$30.00/year
 - ____ Family \$55.00/year \$ _____
- (Gift will be mailed.)

2) Pet memberships \$5.00 per each pet listed:

(Available only to new/renewing members)

List the # of pets you would like to enroll below:

____ Dog(s) **X\$5 each** \$ _____
Name (s)

____ Cat (s) **X \$5 each** \$ _____
Name (s)

____ Other (list type): _____ **X \$5 each** \$ _____
Name (s)

Total for pets \$ _____

Enclosed is my total membership of \$ _____
(Please make checks payable to PAWS)

Please check if we may publish your name in *The Pet Scoop* as a new of member of PAWS. Yes ____ No ____