



Dues are based on a calendar year. Please print the following information as you wish it to appear in the biennial membership roster. *Fields are required, if applicable.

COA Membership Application

NEW RENEWAL CHANGE

*Name: _____

*Street Address: _____

*City: _____ *State: _____

*Zip+4: _____ *Country _____

Phone (Home/Cell/Work) _____

*Email: _____ *Publish? YES NO

Postage Options*: (Check One)

USA Bulk Mail = \$25.00 USA First Class = \$30.00

Canada & Mexico = \$30.00 All Other Countries = \$40.00

DO NOT COMPLETE

PayPal: _____ Check #: _____ Dated: _____

Type of Membership: Individual Family/Household

 Club Library Museum

Shell Club Affiliation: _____

***POSTAGE OPTIONS:**

USA Bulk	[\$25.00 dues + no additional postage]	= \$25.00 Total
USA First Class	[\$25.00 dues + \$5.00 postage]	= \$30.00 Total
Canada and Mexico	[\$25.00 dues + \$5.00 postage]	= \$30.00 Total
All Other Countries	[\$25.00 dues + \$15.00 postage]	= \$40.00 Total

PAYMENT OPTIONS: CHECK PAYPAL

1. Send **check** (payable to **Conchologists of America**) drawn on US bank and completed COA membership application to:

Linda Powers
 COA Membership Director
 2700 N. Beach Road Unit D106
 Englewood, FL 34223
 USA

2. COA accepts **PayPal** at: **billing@conchologistsofamerica.org**. When paying via PayPal please email or mail completed membership application above to Linda Powers at **linda.powers1@gmail.com**. For information on setting up a PayPal account please go to **www.paypal.com**.