# 2022 PACRS Membership Form

Name: _____________________________________

Address: _______________________________________________________________________

_______________________________________________________________________________

Phone: ______________________________________

Email: ______________________________________

(Please provide email, as it is the most efficient and economical means of communication)

<table>
<thead>
<tr>
<th>Check Membership Level</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual (includes Spouse)</td>
<td>$25</td>
<td>_____</td>
</tr>
<tr>
<td>Organization / Business</td>
<td>$50</td>
<td>_____</td>
</tr>
<tr>
<td>Additional Donation</td>
<td></td>
<td>_____</td>
</tr>
</tbody>
</table>

From time-to-time volunteers are needed for special projects. If you are interested in volunteering your time, please check below.

☐ Yes, I may be able to help
☐ No, not at this time

Submit form with check and mail to:

PACRS
1735 Archer Lane
Nekoosa, WI 54457


THANK YOU!!!!

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