



GAMMA SIGMA DELTA MEMBERSHIP RENEWAL FORM

_____ I am enclosing \$20 as I wish to remain an active member for 2016

_____ Payment in ADVANCE. I am enclosing \$ _____ to extend my active membership
_____ years at \$20 per year.

_____ I am NOT enclosing a dues payment as I wish to become inactive.

_____ I have RETIRED and wish to remain ON the mailing list

_____ I have RETIRED and wish to be taken OFF the active mailing list.

To save mailing costs, please provide your e-mail address below.

NAME _____

ADDRESS _____

_____ ZIP Code _____

PHONE _____

E-MAIL _____

Please return the completed form to:

For On-Campus Mail

Robert J. Wright
GSD Membership Coordinator
Entomology Department
ENTO 103 - 0816

For U.S. Mail

Robert J. Wright
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