

**Northern Illinois Conservation Club
P.O. Box 1
Antioch, IL 60002**

Membership Application

Name _____ **New**
Address _____ **Individual \$25**
City/State _____ **Zip** _____ **Family \$35**
E-mail Address _____

Membership expires March 31st each year and is subject to approval by the “Club.”

Interests and comments _____

Please send check payable to Northern Illinois Conservation Club or N.I.C.C.