

Geological Society of Kentucky Membership Application

LAST NAME:	FIRST NAME:	MIDDLE:
COMPANY:		
PREFERRED MAILING ADDRESS:	HOME BU	JSINESS
STREET	P.O. BOX	APT#
CITY:	STATE	ZIP:
WORK PHONE:	HOME PHONE:	FAX:
EMAIL:		
DEGREE: Associate BA BS MS PHE INSTITUTION:	MAJOR:	·
 ■ Member - Persons who hold a degree geology or a related discipline as the learning involved in, or support the proof the society may also become member as the society may also become members. 	cheir profession. Those busic profession of Geology or a re- nbers. eady hold a degree, but are learning.	edited college or university and/or practice nesses, corporations, institutions of higher lated discipline, and who support the values full-time students in geology or a related ed discipline by profession but support the
		ogy within the Commonwealth of Kentucky.
Honorary or Emeritus - persons dis Honorary or Emeritus members may		o the advancement of Geology in Kentucky.
APPLICANT SIGNATURE:		DATE:
RETURN WITH DUES PAYMENT OF S	\$10 TO: Geological Society	of Kentucky
C.	o/ Faith Fiene	
	O Box 704	
	exington, Kentucky 40588	
L	omingion, recitaony 10000	

or by Paypal, go to the Payments tab on the GSK front page www.uky.edu/OtherOrgs/GSK and follow instructions.

*Please make checks payable to the Geological Society of Kentucky