

SHREVEPORT GEOLOGICAL SOCIETY

P.O. BOX 750 • Shreveport, LA 71162

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2023-2024 Membership & Dues Notice

Shreveport Geological Society
P. O. Box 750, Shreveport, Louisiana 71162

COMPLETELY FILL OUT THE INFORMATION INCLUDING A VALID E-MAIL ADDRESS. RETURN IT WITH YOUR DUES PAYMENT BY OCTOBER 31, 2023.

*You can renew online instead
of filling out this card!*



www.sgsi.org



Active \$25 / yr	
Associate \$25 / yr	
Honorary \$0 / yr	
Student \$5 / yr	
Optional Donation SGS Scholarship Fund	
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Total Payment	

NAME (Please Print) _____

Check if new applicant or change of address.

SHREVEPORT GEOLOGICAL SOCIETY, P.O. BOX 750 • SHREVEPORT, LA 71162

DATE _____

APPLICANT OR MEMBER PLEASE TYPE OR PRINT

LAST NAME FIRST INITIAL NICKNAME

COMPANY POSITION OR TITLE

COMPANY MAILING ADDRESS CITY STATE ZIP COMPANY PHONE

HOME ADDRESS CITY STATE ZIP HOME PHONE

FAX NUMBER E-MAIL ADDRESS CELL PHONE

SCHOOL	_____	DEGREE	_____	MAJOR	_____	YEAR	_____
	_____		_____		_____		_____

PROFESSIONAL AFFILIATIONS	AAPG <input type="checkbox"/>	GSA <input type="checkbox"/>	SEG <input type="checkbox"/>	SEPM <input type="checkbox"/>	AIME <input type="checkbox"/>	SPWLA <input type="checkbox"/>
	APGS <input type="checkbox"/>	PS <input type="checkbox"/>	AGI <input type="checkbox"/>	SIPES <input type="checkbox"/>	SPE <input type="checkbox"/>	OTHER _____

OUTLINE OF EXPERIENCE _____

SPOUSE'S NAME _____

PREFERRED MAILING ADDRESS
 HOME BUSINESS
 EMAIL ME THE NEWSLETTER
 (no printed copy will be mailed)

QUALIFICATIONS FROM BY-LAWS

In order to be eligible for active membership, an applicant shall be engaged in the practice or teaching of geology or related sciences.

In order to be an associate member, an applicant shall be interested in geological science but not actively engaged in the practice or teaching of geology or related sciences.

To The Executive Board:

I hereby apply for ACTIVE ASSOCIATE membership in SHREVEPORT GEOLOGICAL SOCIETY and pledge myself to abide by its Constitution and By-laws.

Date: _____

Signature: _____

SPACE BELOW TO BE USED FOR PROCESSING ONLY

Membership Committee

Received: _____

Approved for: Active
 Associate
 Student

Executive Board

Approved: _____

SECRETARY

Date: _____