

# CHARLOTTE HARBOR ANTHROPOLOGICAL SOCIETY

## Membership Application Form

Date \_\_\_\_\_ First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ ZIP \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \_\_\_\_\_

### Membership Category

\_\_\_ Student \$10. \_\_\_ Individual \$25. \_\_\_ Family \$40. \_\_\_ Patron \$100.

\_\_\_ Benefactor \$250. - ? Amount \_\_\_\_\_ -

Code of Ethics: I agree to abide by the code of ethics regarding the laws protecting the location and wellbeing of archaeological sites and prehistoric artifacts. Including but not limited to publicizing the location of fragile and protected sites and the removal of artifacts from state lands.

\_\_\_\_\_  
Signature\_

Charlotte  
Harbor  
Anthropological  
Society



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