Frozen Fins, Vermont Parrot Heads In Paradise, Inc.
Membership Application

*** : Denotes a required field**

First Name:	*
Last Name:	*
Nick Name:	*
Address:	*
City:	*
State:	*
Zip:	*
Day Phone:	*
Home Phone:	*
Email:	*
Date of Birth:	
Occupation:	

Membership fee is $15 for singles, $25 for household

Make Checks Payable to: Frozen Fins, VT PHIP Inc.

Mail to:

Frozen Fins:
VT Parrot Heads In Paradise, Inc.
c/o Rodger Brassard
17 Winding Brook
South Burlington, VT 05403

I would like to volunteer for:

- ☐ Organize Club Events
- ☐ Hold a Club Office
- ☐ I have Graphics Skills to share

How did you hear about Frozen Fins:

- ☐ Internet
- ☐ Club Event
- ☐ Frozen Fins Club Member
  *name*_____
- ☐ Other
  _____