



Petenwell and Castle Rock Stewards

PO Box 164 Nekoosa, WI. 54457 pacrs.org/

2024 PACRS Membership Form

Name: _____

Address: _____

Phone: _____

Email: _____

(Please provide email, as it is the most efficient and economical means of communication)

Check Membership Level:

Individual/Family (\$25)_____

Organization/Business (\$50)_____

Additional Donation _____

Time-to-time volunteers are needed for special projects. If you are interested in volunteering your time, please check below.

_____ Yes, I may be able to help _____ No, not at this time

Submit form with check and mail to:

PACRS

PO Box 164

Nekoosa, WI 54457

Click on log on to <https://pacrs.org/get-involved> and renew your membership via Pay Pal.

THANK YOU!!!!

Follow us on social media <https://www.facebook.com/PACRS>

<https://www.instagram.com/pacrs21>