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KPFA Membership Form Please update your information and remit with your 2023 membership payment.

Thank You

First Name: _____ Last Name: _____

Mailing Address:

Street: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

_____ Permit Number(s): _____

Membership Type: _____ Stat Area: _____

OFFICE USE ONLY:

____ \$150.00 Individual Permit Holder

____ \$50.00 Minor Permit Holder

____ \$25.00 Individual Crew Member

____ \$150.00 Processor or Marketer

____ \$50.00 Associate Member

_____ Date Received

_____ Check No.

_____ Cash Amount

_____ Paypal/Website Payment