GROUNDWATER GUARDIAN TEAM ROSTER

A team should include at least four members and be representative of the community/service area. Team members will be added to The Groundwater Foundation’s e-mail list to receive periodic program updates.

Contact Person:
Address:
City: State: Zip: Country:
Daytime Phone: Fax:
E-mail:

Title and Organization:

Representative Category/Categories:
☐ Citizen ☐ Business/Agriculture ☐ Education ☐ Government ☐ Other (if applicable)

Contact Person:
Address:
City: State: Zip: Country:
Daytime Phone: Fax:
E-mail:

Title and Organization:

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(Duplicate as Needed)