



Tallahassee Writers Association Membership Form

NAME _____

ADDRESS _____

ADDRESS 2 _____

CITY/STATE/ZIP CODE _____

TELEPHONE _____ E-MAIL _____

MEMBERSHIP LEVELS (check one) student (\$20) general(\$35) family(\$50)
 professional (\$60) supporting (\$100) sustaining (\$500) sponsorship (\$1000)

PLEASE INDICATE METHOD OF PAYMENT:

Check enclosed Charge: Master Card VISA

Credit Card # _____ EXP. Date _____

Signature _____

Must be the same as name on credit card

Give form to TWA treasurer or mail to:
Tallahassee Writers Association, Inc.
P. O. Box 3428
Tallahassee, FL 32315-3428

The Tallahassee Writers Association, Inc., established in 1983, is a 501c3 non-profit organization, and is registered with the State of Florida (1-800-435-7352). Our Federal Tax ID number is 43-2084782. _____
