



WEST TN FIL-AM MEMBERSHIP REGISTRATION

WTFAA _____

REGISTRANT INFORMATION

Name:	Nickname:	Email:
Address:		
Phone:	Date of Birth:	Preferred Method of Contact:

SPOUSE INFORMATION (IF JOINT INFORMATION)

Name:	Nickname:	Email:
Phone:	Date of Birth:	Preferred Method of Contact:

CHILDREN (IF REGISTERING AS "FAMILY")

Name:	DOB:	Name:	DOB:
Name:	DOB:	Name:	DOB:

How would you like your information displayed in our directory?
(Please keep in mind that this directory is a way for members to get to know one another and is used primarily for networking purposes.)

- ☐ Public Information – Name, Address, Phone Number, Family Members
☐ Private Information – Name, Address Only
☐ Ultra-Private – Name Only

ANNUAL MEMBERSHIP DUES

(CASH, Money Order or Personal Checks are accepted)

Family rate (husband/wife & dependent children)	\$25.00
Husband & wife ONLY	\$20.00
Per person	\$15.00

SIGNATURE

I certify that the above listed information is correct.

Signature of registrant:

Date:

ADDITIONAL INSTRUCTIONS

1. Please make checks & money orders payable to Mitzi Williams and/or Sandra Dee. All registrations must include payment for annual dues.
2. All mail-in membership registrations must be sent to: West TN Fil-Am Registration c/o Mitzi Williams 17 Fawnridge Dr., Jackson, TN 38305

CONTACT US VIA EMAIL (filam.tn@gmail.com) OR FACEBOOK: Fil-Am Jackson



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