

Almanzo & Laura Ingalls Wilder Association

MEMBERSHIP APPLICATION



New ____ Renewal ____

Category (select one)

Senior \$25 ____

Individual \$30 ____

Family \$35 ____

Name (print) _____

Address _____

Telephone _____ Email _____

Membership information, including email address, is confidential

Please fill out and return to: ALIWA, PO Box 283, Malone NY 12953
Make checks payable to: Almanzo & Laura Ingalls Wilder Association (or ALIWA)
