Updated: 25 Jan 2013

Please print a copy of this Application Form and snail mail it to:

Jimmy Durham 150 James St. Benton, LA 71006

Make check payable to ALTOS.



	ALTOS Membership Applica	tion Form
Name		Date
Street		
City	State	ZIP
Telephone ()	Fax ()	
E-Mail		
() New Member	() Renewal	() Address Change
() Individual \$ 10.00	() *Family \$15.00	() *Student \$5.00
		() Donation \$
* Please add the names of the other famil	y members on the back of this form	n. Two votes.
* A student is defined as someone K-12,	and is nonvoting.	
understand that membership fees are due	not later than the end of Septemb	er 31, annually.
understand that I am entitled ALTOS in neets for an individual and each member of		ting rights, and a \$2 registration fee reduction to A
Signature of Member or Family	T J	

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