

Atlanta Friends of the Alphabet

Membership Application

_____ **New Member. WELCOME! Please fill out the form ENTIRELY.**

_____ **Renewing Member. Please indicate changes only.**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Birthday (Month/Day) _____

Spouse/Partner's Name: _____

**MEMBERSHIP DUES ARE \$24.00 PER YEAR, DUE SEPTEMBER 1ST
AND CAN BE PAID IN THE FOLLOWING WAYS:**

- 1) Check (payable to FotA) and mailed to our Treasurer:
Barbara Leasure at 30 Mimosa Court, Oxford, GA 30054
- 2) Electronically through Popmoney or Zelle: use bal_jmh@bellsouth.net
- 3) Electronically through Venmo: use (Barbara Leasure) @ATL_FOTA
- 4) Online bill pay through member's bank

** NOTE: PayPal is no longer accepted for guild payments.*

OUR GUILD NEEDS YOUR HELP

Please indicate areas you would like to volunteer your time and talent!

- | | |
|---|--|
| _____ Hospitality | _____ Demonstrating Calligraphy |
| _____ Library | _____ Demonstrating Related Art Techniques |
| _____ Newsletter | _____ Exhibits |
| _____ Membership | _____ Financial Expertise |
| _____ Programs (Arranging Meeting Topics) | _____ Photography\Historian |
| _____ Website\Social Media | _____ OTHER, please specify |
| _____ Workshops/Workshop Support | _____ |
| _____ Event Planning/Holiday Party | _____ |

Thanks for being an Atlanta Friends of the Alphabet member!