



WRITERS' INK CO-OPERATIVE INC

MEMBERSHIP APPLICATION

(A Not-for-Profit Organization)

Nora Holt, 404 Thurber Dr. W. # 3, Columbus OH 43215

www.writersinkcreativity.com noraholt85@yahoo.com Contact: (614) 493-3298

(Please make checks out to Nora Holt)

MEMBERSHIPS:

Active:	\$5.00		
Couples:			each June (<i>Donations gladly</i>
Associate:	Annual		<i>accepted!</i>)
	Dues,		Date of Application:
\$12.00	\$18.00	payabl	

First Name: _____ Last Name: _____

Address: _____

City: _____ Country if not USA _____
State _____ Zip _____

Phone: _____ E-Mail: _____

Dues Amount: \$ _____ New Renewal. _____ Donation: _____

Signature: _____

PLEASE KEEP BELOW THIS LINE FOR YOUR RECORDS

Writers' Ink Co-operative Inc
Membership Receipt

Date: _____
Amount: \$ _____ Membership: _____

