

INLAND NORTHWEST BLUEGRASS ASSOCIATION Membership Application

New Application Renewal Change of information (name/phone/email/address)

NAME _____ PHONE (____)____ - _____ EMAIL _____

ADDRESS _____ APT. # _____

CITY _____ STATE _____ ZIP _____

Membership/Donation Family \$20 for 1 year

SEND Monthly *Blabber* Newsletter to: Address above Email address Both

SIGNATURE _____ DATE _____

PLEASE SEND PAYMENT TO: Inland Northwest Bluegrass Association, PO Box 942, Spokane, WA 99210-0942

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