



AVRA Membership Application Form

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Please fill out and give to one of the AVRA members at one of the

Events we participate in, or mail it to:

AVRA Secretary – Marilyn Downing PO Box 49, Ashland, NH 03217

Name _____ **age** _____

Address _____

City _____ **State** _____ **Zip** _____

Telephone () _____

E-Mail _____

Signature _____

Date _____

Type of annual membership:

() Regular 17 to 64 \$ 15.00

() Senior 65 and up \$ 10.00

() Youth 16 and under \$ 10.00

Do you have a layout

Or modular ???

YES or NO

Type _____

Size _____

Scale _____