



Print Form

Membership Application

Membership: \$15.00

Please fill out this form, print it, and mail it with your check made payable to WALA for \$15.00 to:

Anne Ethen, WALA Treasurer
Angelou Branch Library
3051 E 21ST ST N
Wichita KS 67214

Date of application

Member Information

Name

Position

Institution

Street Address

City, State, Zip

Phone Number

Email

Home street address (optional)

Home City, State, Zip (optional)

Phone Number

Email

Should WALA correspondence be addressed to you: at work
 at home

Would you like a receipt?: Yes No

Memberships are from July 1 through June 30 each year.

Is this a.. renewal
 new membership

If this is a renewal, have you had a change in....
 name position
 Institution home address

Please supply any OLD information here. This will help us to keep our mailing list up-to-date.

Old information: