



THE WORLD ATLATL ASSOCIATION, Inc
Membership Application Form

*You can also join
and pay online
via:*

Yearly Dues: \$15 US/Euros or equivalent (individual or family)

worldatlatl.org

Supporting: \$30 _____ Contributing \$60 _____

Date: _____

NAME* _____

Please check:
New Member? _____

ADDRESS _____

Birth Year? _____

CITY _____

Send newsletter by mail? _____

STATE/REGION _____

I would like a User Name and
Password to access

POSTAL CODE _____ COUNTRY _____

WAA website Member
Only areas _____

EMAIL _____ PHONE _____

FAMILY MEMBERSHIPS: Please list name, year of birth, e-mail, phone if different from above on the back of this form or another sheet of paper (Birth year used to determine eligibility for Youth awards and voting in elections)

Make check payable to **The World Atlatl Association** and mail with this form to the
WAA Treasurer:

Anita Lukes, Treasurer, 3809 Broadview Rd, West Lafayette, IN 47906, USA