

APPLICATION FOR MEMBERSHIP

Return application to your closest District or mail to:
ABATE of Kansas, Inc., P.O. Box 102, 610 Elm, Perry, KS 66073
Membership in ABATE of Kansas is \$25 per person, Life \$500 as of Jan 1, 2007
PLEASE PRINT CLEARLY

Date _____ Renew _____ New _____ Life _____ Address Change _____

Card # _____ District _____

Signed up by ABATE member _____

Full Name _____

Address _____

City _____ State _____ Zip Code _____ County _____

Phone (Area Code) _____ Nickname _____

Are you a registered voter? _____ County _____

MEMBERSHIP FEES ARE NOT TAX DEDUCTABLE

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ABATE OF KANSAS, INC



610 Elm
Perry, KS 66073

785-597-5140

Date _____

Received From: (print full name)

For:

One year membership that expires:

\$ _____ District _____

Taken by _____
(Print full Name Please)

Please Keep This Receipt