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## MEMBERSHIP APPLICATION

Date: \_\_\_\_\_

### *Voting Memberships*

\_\_\_\_\_ Lifetime **\$500.00**

\_\_\_\_\_ Annual Family/Farm/Veterinarians **\$25.00**

### *Non-Voting Membership*

\_\_\_\_\_ Youth **\$7.00**

Each Family/Farm membership is allowed one vote, but all members of household/business will be FALA members and eligible for all FALA events.

Primary Member: \_\_\_\_\_

Alternate Contact \_\_\_\_\_

Farm or Business Name: \_\_\_\_\_

Others to be included in membership:

\_\_\_\_\_  
Street Address:

Business or Mailing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Other: \_\_\_\_\_

Primary E-mail: \_\_\_\_\_

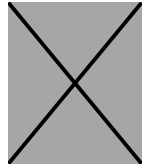
Alternate Email: \_\_\_\_\_

Web site: \_\_\_\_\_

Would you rather receive your information by: Mail \_\_\_\_\_ E-mail \_\_\_\_\_

Interests/Uses for your Alpacas and Llamas?

_____ Breeding	_____ Showing	_____ Packing	_____ Carting	_____ Fiber
_____ Youth	_____	_____	_____	_____
_____ Performance	_____ Pets	_____ Therapy	_____ Guard	_____ Other



# Alpacas: \_\_\_\_\_ #Llamas: \_\_\_\_\_

Other Alpaca or Llama Organizations to which you belong \_\_\_\_\_

**Veterinarian:** \_\_\_\_\_ **City:** \_\_\_\_\_

\_\_\_\_\_ **Phone:** \_\_\_\_\_

**Shearer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

\_\_\_\_\_ **Phone:** \_\_\_\_\_

Please return application with your check or money order to: FALA ♦ c/o Ed Smyth, Treasurer ♦ 8751 SE US Highway 301 ♦ Hawthorne, FL 32640