

| Individual \$15.00 Annually | | | |
|--|---|---|--|
| Print Name (Last, first) | | | |
| Print Address (Include Apt./Suite No.) | City, State and Zip | City, State and Zip | |
| Home Telephone (include Area Code) | Work Telephone (Include Area Code) | Cell Phone (include Area Code) | |
| Print Your [] Profession, [] Talent or [] Other | | | |
| Print Your E-Mail Address | | | |
| [] Family \$25.00 Annually | | | |
| Print Adult Names (Last, first) | | | |
| Print Children Names (17 & Under) | | | |
| Print Address (Include Apt./Suite No.) | City, State and Zip | City, State and Zip | |
| Home Telephone (include Area Code) | Work Telephone (include Area Code) | Cell Phone (include Area Code) | |
| Print Your [] Profession, [] Talent or [] Other | | | |
| Print E-Mail Addresses | | | |
| [] Organization/Clan \$100.00 Annually | | | |
| Print Your Organization/Clan/Your Name | | | |
| Print Your Mailing Address | City, State and Zip | City, State and Zip | |
| Your Telephone | Your position or title in this Organization | Your position or title in this Organization | |
| Print Your E-Mail Address | | | |
| Print Name of 2nd Designee (Last, first, middle) | | | |
| Print Address (Include Apt./Suite No.) | City, State and Zip | City, State and Zip | |
| Home Telephone (include Area Code) | Work Telephone (include Area Code) | Cell Phone (include Area Code) | |
| Print Your E-Mail Address | | 1 | |
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Please forward this application and your check or money order, payable to:

WISCONSIN SCOTTISH INC. P. O. Box 270292 West Allis, WI 53227

www.wisconsinscottish.org

email: info@wisconsinscottish.org