



**Application for Membership
2019-2020**

Name _____

Address _____

City, St, Zip _____, _____

County (WV only) _____

Phone: _____ Landline _____ Cell

Email: _____

Referred by: _____

Writing interests: _____

Membership type: _____ Adult _____ Student _____ Youth (under 18)

Adult: \$25 per year Student: \$10 per year Youth: \$5 per year

Due annually on July 1

_____ Check here if you want your newsletter electronically instead of mailed.

Make checks payable to WV Writers, Inc and mail to:

WV Writers, Inc.
c/o Brad Mills
PO Box 972
Elkview, WV 25071