

FSFA MEMBERSHIP APPLICATION

I'd like to be a member of the Florida State Fiddlers Association. Here's my information and my check for \$15.00.

Name: _____

Address: _____

City, State, Zip: _____

E-mail: _____

Phone: _____

Music Interests: _____

Please send this completed application along with your check for \$15.00 to:

**Florida State Fiddlers Association
c/o Kay Van Treese, Membership Coordinator
P.O. Box 13986
Tallahassee, FL 32317**