



**Avoyelles Animal Welfare Society, Inc.
Membership Drive 2021
Membership Form**

Name: _____

Address: _____

Telephone: _____

Single Dues: \$25.00 _____

Family Dues: \$35.00 _____

Payment: Check () Cash ()

**Please check your areas of interest in supporting
AAWS:**

- Volunteering**
- Fundraising/fundraisers**
- Donating/Pledging**
- Other, please describe: _____**

Please return completed form and payment to: AAWS, ATTN: Sandra Tassin, AAWS Secretary, P.O. Box 492, Cottonport, LA 71327.