



The Writers' Center of Indiana

Membership form

Sign me up!

Name _____

Address _____

City _____ State _____ Zip code _____

Telephone _____ E-mail address _____

My membership category:

_____ writer/reader (\$45) _____ writer/reader family (\$65)

_____ student/with ID(\$25) _____ teacher(\$25)

_____ senior 60+(\$25)

My additional tax deductible donation ensures that I'm doing all that I can to foster the literary arts in Indiana. You can count on me as a:

_____ friend (\$100-249) _____ patron (\$500-999)

_____ mentor (\$250-499) _____ muse (\$1,000+)

Payment method:

_____ Check payable to the "Writers' Center of Indiana, Inc."

_____ Visa or MC # _____ exp. date _____

Cardholder's signature _____

Amount enclosed Membership fee: \$ _____

Additional donation: \$ _____ (tax deductible)

Total: \$ _____

Please send form and payment to:

The Writers' Center of Indiana

P.O. Box 30407

Indianapolis, IN 46230-0407

If you would like to volunteer at the WCI please call us 317.255.0710

or e-mail mail@indianawriters.org. Thanks!