

KITES OVER NEW ENGLAND

MEMBERSHIP APPLICATION

New (☐) Renewal (☐) Gift (☐)

Member's Name(s): If a family membership please add all names.

Address: _____

City, State, Zip: _____

Phone: _____ E-Mail _____

Dues: \$10.00 _____ per year. All memberships renew on January 1st each year.

How did you hear about us? _____

Are you a member of the American Kitefliers Association (AKA)? Yes (☐) No (☐)

Thank you for joining Kites Over New England. With membership you will receive The Flypaper published from time to time, filled with club news and a calendar of upcoming events and access to Club sponsored events.

Kites Over New England Web site: <http://www.kone.org> and see our Facebook page.
www.facebook.com/KONEpage



Mail completed form and payment to:

Kites Over New England
11 W. Bowers St #2
Lowell MA 01854