



International Twins Association

A Social Group for Twins, Multiples, Surviving Multiples, Family & Friends

www.intltwins.org
405-225-8829

secretaries@intltwins.org

Like us on Facebook

Annual Membership Form

Member

 NEW

 Date: _____
 Associate Member

 RENEWAL

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Cell: _____ Home: _____

Email: _____

Birth date: _____

Multiple's Name (s): _____

**Membership Cards will be given at the annual convention or sent by US Mail, if you do not attend.*

Please share how you found us- _____

D U E S	Members:			
	Infant-10 years	_____ x	US \$5.00/twin	= \$ _____
	11-17 years	_____ x	US \$10.00/twin	= \$ _____
	18 yrs & over	_____ x	US \$20.00/twin	= \$ _____
	Associate Members:	_____ x	US \$20.00/member	= \$ _____

TOTAL PAID: \$ _____

Mail completed form and payment to:

US Cash _____
 US Check# _____
 US Money Order# _____

International Twins Association
c/o Brenda Pritchett
74 Clydesgate Cove
Atoka, TN 38004

Office Use Only:

Date Received: _____ By: _____ Membership Card: _____ By: _____
 MT Updated/Flagged: _____ By: _____ QB Updated: _____ By: _____