

Clan McAlister of America

Membership Application / Renewal Form

Please complete this form and send it along with your payment to the address below.

New Member

Renewing Member

Member Number: _____

Name _____

Spouse's Name _____

Street Address _____

City _____ State _____ Zip Code _____

Overseas Address _____

Email Address _____

Home Phone _____ Cell Number _____

Referred by CMA Member Other

Membership Dues

(Includes subscription to the "Mac-Alasdair Clan journal")

Check only one of the 6 boxes below!

\$ 25/Two Years Quarterly **Digital** edition **emailed** to you

OR

\$ 25/One Year Quarterly **Printed Copy** mailed to your **domestic US** address

\$ 45/Two Years Quarterly **Printed Copy** mailed to your **domestic US** address

\$110/Five Years Quarterly **Printed Copy** mailed to your **domestic US** address

\$750/Lifetime Quarterly **Printed Copy** mailed to your **domestic US** address

OR

\$ 45/One Year Quarterly **Printed Copy** mailed to your **international** address

AND

Please make checks payable to: Clan McAlister of America

Mailing address:

Robert W. McAlister, Membership Chairman

624 Linden Dr.

Englewood, FL 34223

(941) 698-1112