

# Llama Fiber Cooperative of North America Membership Application

Please print information clearly

First and Last Name: \_\_\_\_\_

First and Last Name: \_\_\_\_\_

Farm or Ranch Name: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Web Site: \_\_\_\_\_

Email Address(s): \_\_\_\_\_

In order to pay patronage refunds, the cooperative is required to file tax forms with the Internal Revenue Service. This tax information will be held in confidence.

Employer Identification Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Check your payment choice:

*I(We) wish to join the Llama Fiber Cooperative of North America. The initial membership fee of \$ 250.00 is fulfilled by \_\_\_\_\_ attached check \_\_\_\_\_ payment in PayPal. I(We) understand my membership requirements to contribute fiber to the cooperative on a regular basis and to volunteer labor to the cooperative.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please mail completed form and/or check to:

**Llama Fiber Cooperative of North America  
c/o Kathy Gwyn, Treasurer  
128 Aileen Road  
Edinburgh, VA 22824**