



Membership Form

Name (s) _____

Farm Name: _____

Street or PO Box: _____

City or Town: _____ State _____ County _____ Zip _____

Telephone: Home: _____ Cell: _____

Email: _____

Website: _____

Number of Alpacas _____ Number of Llamas _____

Farm available for farm visits Yes _____ No _____

Dues:

Lifetime Membership \$500.00 _____

Annual Family/Farm/ Veterinarian \$25.00 _____

Non-Voting Member/Youth \$7.00 _____

Please Remit Payment to:

FALA

Mary Rose Collins

4211 S. Old Floral City Rd.

Inverness, FL 34450

Membership is due by January 31

7/2024