



The Association of Lincoln Presenters

Membership Information

To apply for membership in the ALP, please fill in the information below as completely as possible, print it out and send with a check or money order, made out to the Association of Lincoln Presenters, for initial membership (\$50.00) or Life Membership (\$200.00) to:

John Cooper
11781 Julie Dr.
Baltimore, OH

Once you submit it, your information will be reviewed, and you will be contacted.

Date: _____

First Name: _____ Last Name: _____ Salutation _____

If you wish to include a middle initial, include it in your First Name field.

Email Address: _____

Street Address: _____

City: _____ State: ___ Zip Code: _____ Country: _____

Phone Number: _____ Spouse (if a member): _____

Character Portrayed: _____ Other, who?: _____

Web Site: _____ Facebook Page: _____

Twitter: _____

Schedule:

Programs:

Background:

Other information, instructions and comments (not for posting on web site):

I want my member information posted on the ALP Web Site (Check if yes): _

New Members Only:

How long have you portrayed this character? ___ Years

Why do you apply for membership?

How will your membership promote the Mission of the ALP?

Personal Reference 1:

Name:

Address:

Phone:

Personal Reference 2:

Name:

Address:

Phone: