

LIVE FREE MEMBERSHIP APPLICATION

- / Yes, I agree with the mission of Live Free USA and want to join. My \$20.00 is enclosed []
- / Put me down for 3-years membership for just \$50.00 []
- / I want to make an additional contribution of \$ _____
- TOTAL ENCLOSED \$ _____**
- / I want to be an active member as an: Instructor [], Writer [],
Event Organizer [], Chapter Organizer []
- / Put me in touch with any nearby Live Free USA chapters or affiliated groups so I can share knowledge and build self-reliance with others []
- / I would like to help organize a preparedness and self-reliance chapter in my area. Please provide more information. []
- / I would like to become a Certified Survival & Preparedness Instructor. Please provide information on this program. []

Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Phone: (optional): _____

**Mail to: Live Free, P.O. Box 3295
Munster, IN 46321**

Thanks for your support