I Would Like To:	Tamah ayahin	A mmley Co	u Nauv Manahanahin	
			r New Membership	
_	_		ed Association	
Name:				
Address:				
City/Town:	State:	_Zip Code:	Tel	
E-Mail Address:				
Special interest or o	concerns:			
Student/ Retir	red \$ 6.00	Organization	ı\$ 25.00	
Single \$ 12.00		Organization \$ 25.00 Sustaining Member \$ 25.00		
Family	\$ 25.00	Condo Assoc	iation . \$ 100.00	
Contributions are tax	deductible. P	lease select one ar	nd mail check to:	
	L.Q	.W.A.		
PC) Box 4243 T	Turnpike Stati	on	
		, MA 01545		