

Kentucky Basket Associations MEMBERSHIP Form

Membership Oct. 1 of current year to September 30 of next year

2024 Membership

This form can be downloaded and printed from our website: www.kentuckybaskets.org.

Name _____

Address _____

City, State, Zip _____

Phone: _____ Evening _____

Email _____

- Please send your completed membership form.
- Please include a check for **membership dues of \$15.**
- Membership checks should be made out to the **Kentucky Basket Association.**
- **Please send the completed form and check to:**

Gail Loeser
8268 Eastdale Dr.
Cincinnati, OH 45255.

- Email Gail Loeser at loeserg@yahoo.com with any questions.
- **2024 Membership is active October 1 - September 30, 2025.**

_____ Checks made out to Kentucky Basket Association for membership

_____ I would like to be on the KBA Board

_____ I am a new member

_____ I do NOT wish to have my picture posted on Facebook or the website

_____ I would like to be on the KBA Board

_____ I would like to volunteer to help during the convention. Please contact me and let me know where I can be of assistance.