



## *NLA Membership Form*

*Name: (Last, First, Middle Initial)*

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*Address: ----- Zip-----*

*Home Phone Number: (-----) -----*

*Cell Phone#: (-----) -----*

*E-mail Address: -----*

***Membership:** Northern Liberty Alliance is a community organization that seeks broad participation by all who support our Mission and Principles. There are two levels of membership:*

*Associate Members of the Northern Liberty Alliance : Must agree to mission and principles of Northern Liberty Alliance. Non-voting; Access to website, email alerts, and event attendance.*

*Full Members of the Northern Liberty Alliance: Must agree to mission and principles of Northern Liberty Alliance and indicate endorsement of by signature; Must attend at least one Northern Liberty Alliance membership meeting per year; Must donate an amount no less than \$20, as determined by steering committee; Voting rights for bylaw-revisions and at annual meeting; Eligibility to seek a position on the steering committee; Access to website, email alerts, and event attendance.*

*Northern Liberty Alliance  
P.O. Box 161545  
Duluth, MN 55816*

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**Northern Liberty Alliance**

*Working to restore and preserve economic liberty and the United States Constitution*