



Old Southwest Membership Application

Name: _____

Address: _____

City, State, Zip: _____

Email Address: _____

Evening Phone: _____ Day Phone: _____

New Renewal

Number of Memberships: _____

Regular Membership - \$5.00 / person Senior Membership - \$3.00 / person

Total Amount Enclosed: \$_____

Please make checks payable to : Old Southwest, Inc.
Mail to: 641 Walnut Avenue, SW, Roanoke, VA, 24016