



# Trail of Tears Association

Annual Membership Dues  
(January 1 – December 31, 2023)\*

Sponsors, Patrons, & Benefactors are listed prominently in two issues of the *Trail News* newsletter and on the TOTA website [www.nationaltota.com](http://www.nationaltota.com) (includes donation amount).

(Circle one) Mr. Mrs. Ms.

Day Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

Circle Chapter Affiliation(s): **AL AR GA IL KY**

City/State/Zip: \_\_\_\_\_

**MO NC OK TN**

1. MEMBERSHIP LEVEL			Line 1 total here ▶	\$
<input type="checkbox"/> Basic \$25 – \$99	<input type="checkbox"/> Sponsor \$100 – \$499	<input type="checkbox"/> Patron \$500 – \$999		
<input type="checkbox"/> Benefactor \$1000+	<input type="checkbox"/> Student \$10 (enclose copy of college ID or, for minors, birth certificate)			

+

2. CHAPTER AFFILIATION(S)			Line 2 total here ▶	\$	
<u>One chapter affiliation is free</u> with all memberships. Each additional chapter is \$10 each.					
<input type="checkbox"/> Alabama	<input type="checkbox"/> Arkansas	<input type="checkbox"/> Georgia	<input type="checkbox"/> Illinois	<input type="checkbox"/> Kentucky	<input type="checkbox"/> Missouri
<input type="checkbox"/> N. Carolina	<input type="checkbox"/> Oklahoma	<input type="checkbox"/> Tennessee	<input type="checkbox"/> Check this box if you do not want a chapter affiliation and just want a national membership.		Enter "0" if selecting only one (1) state chapter

3. TOTAL ENCLOSED (check or money order)		Add Lines 1 and Line 2 here ▶ for Total Amount Due	\$
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Check this box if you wish to receive a membership card.

Check this box if you wish to opt out of receiving a membership card.

If you have any specific donation requests or comments, state here:	<input type="checkbox"/> Check this box if you would like to receive your newsletters by E-mail rather than by the U.S. Postal Service.
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**TOTA OFFICE USE ONLY**

Amt Paid \$ \_\_\_\_\_ Check # \_\_\_\_\_ Date Processed \_\_\_\_\_

Expiration \_\_\_\_\_ Receipt # \_\_\_\_\_ State Chapter(s) **AL AR GA IL KY**

Received by \_\_\_\_\_ **MO NC OK TN**

Accounting: \_\_\_\_\_

Send form and payment to:

Trail of Tears Association  
PO Box 329  
Webbers Falls, OK 74470

Pay on website [www.nationaltota.com](http://www.nationaltota.com)

Questions? Call 918-464-2258

\* Renewals not received by March 1<sup>st</sup> will be removed from membership and mailing lists.