



Artist-Blacksmith's Association of North America, Inc.
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Mailing address: _____

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Email address: _____

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Description of the geographical area you cover _____

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P.O. Box 3425
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Upon receipt of this form and approval by the ABANA Board of Directors your organization will be placed on ABANA's list of Affiliate organizations. The information that you listed above will be distributed to all ABANA Affiliates and placed on the ABANA website.