



# Spillin' the Beans

## Member Information

Name: \_\_\_\_\_  
*Last* *First*

Address: \_\_\_\_\_  
*Street Address*

\_\_\_\_\_ *City* *State* *ZIP Code*

Home Phone: (    ) \_\_\_\_\_

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

## Questions

*The answers given will be used word for word in TopLine. If necessary you will be contacted for clarification or expansion of your responses. Thank you for taking the time to share your story with the ORVLA membership!*

**1. Where did you grow up?**

**2. Family Members?**

**3. Education and Memories?**

**4. Pets as a Child?**

**5. Occupation?**

**6. Family Life as an Adult?**

**7. When did you get interested Llamas?**

**8. Interesting Experiences with your Llamas?**

**9. Other animals that you own and love.**

Please feel free to attach/include any photos you would like to share with the membership. Please return your form via email to [orvla.info@gmail.com](mailto:orvla.info@gmail.com) or via mail to Shani Porter 3567 Darby Knolls Blvd. Hilliard, OH 43026