

Westmoreland Yough Trail Chapter

Membership Form

Your privacy is important to us. The WYTC does not share names, addresses, phone numbers, or email addresses with other individuals, organizations or companies.

Name: _____

Address: _____

Phone: _____

Email: _____

- Note: Email addresses are used to send out information about events and other activities.

Membership Type (circle): **New** **Renewal**

Membership Category (Put an "X" in the appropriate space.):

	Individual	\$20	\$
	Family	\$30	\$
	Supporting	\$50	\$
	Benefactor	\$125	\$
	Voluntary Contribution		\$
	Total Enclosed		\$

_____ I'm interested in doing volunteer work. Please contact me.

Please make checks payable to "WYTC" and mail completed form with your check to:

**WYTC
P.O. Box 242
West Newton, PA 15089**



Thank you for your support.