## WVRPA MEMBERSHIP APPLICATION



AGENCY NAME:			3	ASSOCIATION ST
NAME:				OCIA
EMAIL:		PHONE:		
STREET ADDRESS:				
CITY:	STAT	E:	ZIP:	
MEMBERSHIP OPTION	ONS: Please check one.			
ACTIVE \$35/YEAR	R GENCY	\$250/YEAR*	STUDENT \$10/YEAF	₹
AFFILIA	TE/BUSINESS \$75/YEAF	BOARD/C	OMMISSION \$50/YEAR	
*If Agency, please inc	clude a list of included me	mbers from your organiza	tion in the space provide	d below.
MEMBERSHIP TYPE:	Please check one.			
■ NEW TO WVRPA ■ RENEWING MY MEMBERSHIP				
		ROFESSION INTERSES are currently interested		
Aquatics		Park Maintenan	ce	
Community Recreation		Senior Citizen Programming/Access		
Commercial Recreation		Supplier of Leisure Products		
Federal/State Government		Therapeutic Recreation		
Professional Educa	ition	☐ Voluntary Age	ncy (4-H)	
Other				
		ke payable to: WVRF		
IV	all to: WVRPA 164 V	V. Main St. Bridgepo	rt, WV 26330	
Agency	Memberships Only	y: Included Memb	ers Information	
NAME:	TITLE:	EMAIL:		
NAME:	TITLE:	EMAIL:		
NAME:	TITLE:	EMAIL:		
NAME:	TITLE:	EMAIL:		
NAME:	TITLE:	EMAIL:		
NAME:	TITLE:	EMAIL:		

**EMAIL:** 

NAME:

TITLE: