WTA Membership/Renewal Application

Applicants must be at least 18 years old. Dues are \$12 per member; couples at the same address pay \$22 for one set of mailings or \$24 for two sets of mailings. Membership ends December 31 of each year. New applicants joining between October 1 and December 31 will get the last quarter free and have their dues applied to the following year.

<u>If paying by check</u> please complete this application, make your check or money order payable to Westchester Trails Association, and mail your check and a copy of the application to: Westchester Trails Association, P.O. Box 736, White Plains, New York 10602.

<u>If paying by PayPal</u> please complete this application, save it to your computer, and email it to Catharine Raffaele at catharineraffaele@gmail.com.

Application Information:

New members: please complete address, contact information and					your 1	name,
This is a New Member Application	ion 🗆	Renewal				
Name(s):						
Mailing Address (City, State, Zip	p):					
Primary Phone Number:						
E-mail Address:						
Method of Payment: Check or M	Ioney Order □	PayPal □				
How did you hear about WTA?						
List membership in other hiking	or conservation	organizations:				
Tell us of areas that interest you	:					
0	Trail maintenar Planning or hel		Clerical work: ☐ social/weekend ev	ents: 🗆		
How do you prefer to receive yo	ur schedules: Ro	egular mail:	E-mail: □			
If you do not wish to have you please specify here:	ır address, telep	phone number a	nd/or e-mail listed	l in WTA p	oublic	ations
Date:						