



Whitewater Canal Trail

YES—I WILL SUPPORT THE CANAL TRAIL!

NAME _____

ADDRESS _____

EMAIL _____

PHONE _____

Membership levels:

- \$25 STEERSMAN - Individual
- \$50 CREW - Family
- \$100 CAPTAIN - Business or Sustaining
- Other gift amount: \$ _____
- I would like to volunteer to _____

MAIL TO:
WHITewater CANAL TRAIL, INC.
P.O. BOX 126
BROOKVILLE, IN 47012 USA

THANK YOU FOR YOUR SUPPORT!