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| **MEMBERSHIP APPLICATION** |
| **YEARLY MEMBERSHIP FEE – JANUARY 1 TO DECEMBER 31 - $15 SINGLE OR $30 FAMILY** |
| **SINGLE MEMBERSHIP**  |
| NAME |
| PHONE (H) | CELL (opt.) | WORK (opt.) |
| ADDRESS: |
| CITY: | POSTAL CODE: |  |
| Email: |
|  |  |  |
| **ARE YOU A MEMBER OF ANY OTHER CLUB?** Yes\_\_\_\_ No\_\_\_\_ |  |
|  |  |  |
| **FAMILY MEMBERSHIP** |
| NAME OF SPOUSE |
| PHONE (H) |  CELL(opt.) |  WORK (opt.) |
| Email: |
|  |  |  |
| **CHILDREN UNDER THE AGE OF 18** |
| NAME | AGE: |  |
| NAME | AGE: |
| NAME | AGE: |
| NAME: | AGE: |
| **PLEASE SEND CASH OR CHEQUE WITH THIS FORM TO:** |
| Nepean Nomads Walking Clubc/o Carol Harrison ,Treasurer5 Maple View Crescent,Ottawa, K2G 5H6 |