

COLORADO RIVER WALKERS MEMBERSHIP APPLICATION

Check one: New _____ Renewal _____.

For renewal please include the year you first became a member. _____

Dues are \$10.00 per year for individual or family membership, \$20.00 for a two-year membership or \$100.00 for a life membership.

Type of Membership: Individual _____ or Family _____

One Year _____ or Two Year _____ or Life _____

Name: _____

Address: _____

City: _____

State & Zip: _____

Home Telephone: _____

Work Telephone: _____

Email Address: _____

Name tags are available for \$15.00 each.

Please print the name exactly as you want it to appear on your CRW name tag:

Name(s) _____

of tags: _____

Amount \$ enclosed: _____

Please send this form and your check to:

Sam Harris
1702 Pheasant Roost
Austin, TX 78758