



**WASHINGTON WATER TRAILS ASSOCIATION**  
 4649 SUNNYSIDE AVE. N. #305 • SEATTLE, WA 98103 • PHONE: 206.545.9161  
 FAX: 206.547.0350 • E-MAIL: WWTA@WWTA.ORG • HTTP://WWW.WWTA.ORG

## MEMBERSHIP FORM

Please fill out the following form and payment information:

### Personal Information

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

Web Address \_\_\_\_\_

Email \_\_\_\_\_  Include me on the WWTA listserve to receive periodic email updates on WWTA events and announcements.

Does your employer match your charitable gift giving?  Yes  No  Not Sure\*

If yes, employer name \_\_\_\_\_

\*If you are unsure of your employer's status on gift-matching, WWTA is happy to check.

### Number of Years

1 year  2 years  3 years

### Membership Level

**Number of Years:** \_\_\_\_\_ **x Membership Level Amount:** \_\_\_\_\_ = \$ \_\_\_\_\_ **Total Amount**

- |                                                  |                                                   |                                                          |
|--------------------------------------------------|---------------------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> Individual Member, \$35 | <input type="checkbox"/> Household Member, \$50   | <input type="checkbox"/> Donor Member, \$75              |
| <input type="checkbox"/> Sponsor Member, \$150   | <input type="checkbox"/> Benefactor, \$250        | <input type="checkbox"/> Trail Patron, \$500             |
| <input type="checkbox"/> Trail Guardian, \$1,000 | <input type="checkbox"/> Lifetime Member, \$5,000 | <input type="checkbox"/> Student/Senior/Low Income, \$25 |

*Please send check or money order payable in US funds to Washington Water Trails Association with this form, or fill out the section below and fax to 206.547.0350.*

### Credit Card Information

VISA  MasterCard  Discover

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_/\_\_\_\_

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

**Referred by WWTA member** \_\_\_\_\_ **or WWTA member number** \_\_\_\_\_

All memberships and donations are tax-deductible. WWTA is a state-registered, non-profit, charitable 501(c)3 organization.