



Membership Application

Name _____

Additional Name (if family membership)

Address _____

Phone _____ Email _____

Membership Type:

Student \$10 Individual \$15 Family \$25 Trail Blazer \$50 or more
 Donation \$ _____

How do you use the trails?

Mountain Biking Hiking Dog Walking Running Road Cycling
 Commuting to Work/School Horseback riding Other _____

Areas of interest:

Trail Development and Maintenance Safe Routes to Schools Newsletter
 Publicity Membership Event Planning Fund Raising
 Grant Writing Volunteer Coordination Administration
 Web Site

We send meeting minutes, notification of events and volunteer activities, and other special member communications to our members via a Yahoo group. Only Advisors and committee leaders can send email to this group so you will not be inundated with email. However, we realize some members may not want to receive email. If this is the case, please check 'No' below.

No, do not add me to the Yahoo group that receives email from the Advisors and Committee Leaders

Make checks payable to:

Sister Trails Alliance
PO Box 2215
Sisters, OR 97759

