

MOUNT BAKER BICYCLE CLUB MEMBERSHIP FORM

□ New Member □	Renewing Member	This is a change of address		
Membership submission date:				
Last name:	First name:			
Address:				
		Postal Code:		
E-mail:				
Contact telephone num	ıber:			

Associate member: ______(An associate member is a member living at the same address as the individual member)

Print this form, fill it out and mail along with a check to:

Mt. Baker Bicycle Club attn: membership Post Office Box 2702 Bellingham, WA 98227

Thank you, and welcome to the club!

Choose your membership type: Individual: \$25			
Family/Associate: \$35			
Additional Donation: (donations support bicycle advocacy programs)			
Total enclosed: US \$			
Please enclose a check payable to: Mount Baker Bicycle Club			

Membership term is calendar year. Yearly renewals are due every January. Payments made September through December extend membership through the following calendar year *for new members*.

See list of membership benefits at: mtbakerbikeclub.org/jointheclub

Would you like to help? Volunteers are our most valuable resource. Please check any of the boxes that appeal to you and we will be in touch:

Ride Leader	Newsletter	Board Member	
Bike to Work and S	chool Day	Chuckanut Classic	
Special Events	Membership	Education	
I can provide discounts on			