

WYOMING VALLEY STRIDERS

Membership Application

(Please print)

Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____

E-mail _____

Date of Birth _____

Signature _____

Check one: New Member _____ or Renewal _____

Return with \$5.00 to:

WYOMING VALLEY STRIDERS

295 South Mountain Blvd.

Mountain Top, PA 18707-1915

