



Membership Form

Thank you for supporting the VBC
www.vbc-usa.com

NEW _____ **RENEW** _____ **TODAY'S DATE** ____/____/____

Membership Type

| | | | | |
|-------------------|------------|-------|-------|-------|
| 1-year Membership | Individual | 15.00 | JOINT | 20.00 |
| 2-year Membership | Individual | 26.00 | JOINT | 36.00 |

NAME you go by (First and Last): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____
AREA CODE NUMBER AREA CODE NUMBER

*EMAIL: _____

SECOND MEMBER:

NAME (First and Last): _____

ADDRESS IF DIFFERENT: _____

*EMAIL: _____

HOME PHONE: _____ CELL PHONE: _____
AREA CODE NUMBER AREA CODE NUMBER

Please complete this form and mail it with a check or money order to:

Vancouver Bicycle Club
ATTN: Membership
PO Box 1456
Vancouver, WA 98668

***Note: Almost all club communications with members are through email. If we don't have your email, you'll be missing out.**