



NEW YORK WALKERS CLUB
membership application (\$20.00)



new _____ renew _____

NYWC# _____

please print clearly in ink

last name first name

mailing address

city state zip

home phone business phone cell phone

email address

male female age birth date

occupation employer

Yes, I accept your invitation to become a member of the New York Walkers Club.
I understand that I am immediately eligible for all member benefits and that my membership will help support the club's efforts to promote walking for fitness and for competition.

signature date

make checks payable to: **New York Walkers Club**
1020 Grand Concourse Suite 15X
Bronx, New York 10451
email: wilson@pouch.com