

Membership Application & Renewal Form – 2017



ADULT OR MR. AND MRS. MEMBERSHIP

Adult Name 1:	Date of Birth (mm/dd/year):
Adult Name 2:	Date of Birth (mm/dd/year):
Mailing Address:	
City, State, Zip Code:	
Home Telephone:	Cell Telephone:
E-Mail Address:*	

YOUTH MEMBERSHIP

A Youth member is 18 or younger as of January 1 of the current membership year.

Youth Name:	Date of Birth (mm/dd/year):
Parent/Guardian Name:	
Mailing Address:	
City, State, Zip Code:	
Home Telephone:	Cell Telephone:
E-Mail Address:*	

FAMILY MEMBERSHIP

A Family Membership includes up to two adults and their children 18 or younger as of January 1 of the current membership year. If you need more room for Youth names, please use the back of this form.

Adult Name 1:	Date of Birth (mm/dd/year):
Adult Name 2:	Date of Birth (mm/dd/year):
Youth Name 1:	Date of Birth (mm/dd/year):
Youth Name 2:	Date of Birth (mm/dd/year):
Youth Name 3:	Date of Birth (mm/dd/year):
Youth Name 4:	Date of Birth (mm/dd/year):
Mailing Address:	
City, State, Zip Code:	
Home Telephone:	Cell Telephone:
E-Mail Address:*	

MEMBERSHIP / RENEWAL FEES

PLEASE MAKE CHECKS PAYABLE TO NERHA:

Renewals only - Add \$25.00 late fee (except Youth) after 3/31/17

MAIL THIS FORM WITH PAYMENT IN FULL TO:

Catherine Nevitt 542 Main St. Apt 10 Waltham, MA 02452

- Family \$65.00
- Mr./Mrs. \$50.00
- Adult \$40.00
- Youth \$10.00

Memberships run from 1/1/17 to 12/31/17.

To qualify for Year End Awards all riders must be a NERHA member in good standing.

TOTAL \$ _____ ENCLOSED

* Add \$5.00 if current email address is not provided for postage and handling fees.

OFFICE USE ONLY: TOTAL REC'D _____ DATE _____ CHECK # _____ BY _____