

# MTA Membership Form

Date: \_\_\_\_\_

Individual (check one)

<input type="checkbox"/> 1 Year	<input type="checkbox"/> 2 Year	<input type="checkbox"/> 3 Year
_____ \$20	_____ \$36	_____ \$45

Family (check one)

<input type="checkbox"/> 1 Year	<input type="checkbox"/> 2 Year	<input type="checkbox"/> 3 Year
_____ \$30	_____ \$55	_____ \$75

Lifetime \$500  
 Donations \$ \_\_\_\_\_



Tax Deductible Total Enclosed: \_\_\_\_\_

Please print clearly  
MTA does not share personal information with third parties

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

To receive newsletters and MTA event information

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

I am interested in volunteer opportunities

**Trail Maintenance:** weed eating/spraying, hand chipping brush, leaf blowing

**Trail Cleanup:** picking up trash

**Events:** Riverfest, Mountain Glory for example

**Fundraisers:**

**Other:** \_\_\_\_\_

Make check payable to McDowell Trails Association

**Mail to:**

McDowell Trails Association  
PO Box 1325  
Marion, NC 28752  
[MTATrails@gmail.com](mailto:MTATrails@gmail.com)

**Thank you for your support!**