

Membership / Donation Form

One Year Membership New Renew

Donate

Date: _____

____ Student (under 18) \$10
____ Individual \$15
____ Family \$25
____ 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

MTA.Member.info@gmail.com

Thank you for your support!