



# Membership Form

**NEW MEMBERSHIP**       **RENEWAL**     **Changes for directory?**

## SECTION 1: MEMBER CONTACT INFORMATION

<b>TITLE</b>	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms
<b>NAME</b>	
<b>ADDRESS 1</b>	<b>MAIN TELEPHONE</b>
<b>ADDRESS 2</b>	
<b>ADDRESS 3</b>	<b>HOME TELEPHONE</b>
<b>TOWN/CITY</b>	
<b>ZIP CODE</b>	<b>PRIMARY EMAIL</b>

## SECTION 2: MEMBERSHIP TYPE AND PAYMENT DETAILS

MEMBER TYPE	DESCRIPTION	MEMBERSHIP DUES (Annual)	Please Check
Annual	Annual Membership	\$35	<input type="checkbox"/>
Lifetime Membership	Lifetime Membership (3 annual installments permitted)	\$360	<input type="checkbox"/>
Supporter	Supporter – you donation goes to purchasing gloves, tools and other equipment to keep the trails open!	\$100	<input type="checkbox"/>
		\$250	<input type="checkbox"/>
Business	Patron – You know you are committed to our goals and want to work with us to see it happen.	\$250	<input type="checkbox"/>
Lifetime Partner	For the very committed business	\$2000	<input type="checkbox"/>
<b>PAYMENT METHOD</b>	<input type="checkbox"/> Institutional Check <input type="checkbox"/> Personal Check		

## SECTION 3: Area of Interest

<input type="checkbox"/> Land & Govt Agencies	<input type="checkbox"/> Fundraising
<input type="checkbox"/> Administrative	<input type="checkbox"/> Promotion & Public Relations
<input type="checkbox"/> Trail Maintenance	<input type="checkbox"/> Community Outreach <input type="checkbox"/> Outdoor Recreation
Please indicate if you would be willing to <b>serve on a committee</b> :	
<input type="checkbox"/> Yes <input type="checkbox"/> Not at this time	
Is there a specific committee you would like to serve on? _____	

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

Send a check made payable to SMMTC to:  
**SANTA MONICA MOUNTAINS TRAILS COUNCIL**  
 PO BOX 345,  
 AGOURA HILLS, CA 91376

SMMTC is a volunteer, tax deductible, nonprofit 501 (c) (3) charitable organization. Tax ID: 95-3911604