



UNITED STATES MONDIORING ASSOCIATION
Club Membership Application
 Year: _____

Club Name _____
 Contact: _____ Phone: _____
 Address: _____
 City _____ State _____ Zip _____
 E-mail _____ Fax _____

List names and addresses of a minimum of three club members:

Mail form to: Kyle Sprague USMRA Treasurer 401 Park Way West Las Vegas, NV 89106
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 For Office Use:

BYLAWS ON FILE
 CLUB PACKET SENT
 DUES PAID

Check one
Full Member Club \$50 <input type="checkbox"/>
Associate Member Club \$25 <input type="checkbox"/>

CLUB ACTIVITIES:
