



## PWTS MEMBERSHIP APPLICATION

Name \_\_\_\_\_ Mailing Address \_\_\_\_\_

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

Date \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

(If family membership) Names of others in your household \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How did you hear about us? \_\_\_\_\_

May one of our Directors contact you directly? \_\_\_\_\_

### Membership Fees:

Individual: \$20 \_\_\_\_\_

Household: \$25 \_\_\_\_\_

Other contribution: \_\_\_\_\_

Please mail completed application and your check to:

**PWTS Coalition**

**3594 Wanda Court**

**Woodbridge, VA 22193**

100% of membership fees are for direct program expenses.

What Passive Public Recreational opportunities are you interested in seeing throughout Prince William County? (Circle as many as you like)

Walking   Hiking   Jogging   Horseback Riding

Fishing   Canoeing/Kayaking   Biking

Bird Watching   Nature/Environment

Historical Trails   Other (Please List) \_\_\_\_\_

**THANK YOU AND WELCOME!**

[www.pwtrailsandstreams.com](http://www.pwtrailsandstreams.com)