

# YELLOW BREECHES WATERSHED ASSOCIATION MEMBERSHIP APPLICATION

As a member of the Association, I agree with and support the YBWA Mission and Goals.

Signature: \_\_\_\_\_

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

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

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

\_\_\_\_\_

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

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

E-mail Address: \_\_\_\_\_

Area of Special Interest/Ability: \_\_\_\_\_

\_\_\_\_\_

I am willing to serve on a Committee or help with: \_\_\_\_\_

Membership Class:    \_\_\_ \$15 Individual

                          \_\_\_ \$25 Family

                          \_\_\_ \$5 Student/Senior

                          \_\_\_ \$100 Corporation

Donation: \$ \_\_\_\_\_

Make Check Payable to:

Yellow Breeches Watershed Association  
c/o Lower Allen Township Authority  
120 Limekiln Road  
New Cumberland, PA 17070-2428