

Shawangunk Runners

2010 Annual Membership Application

Annual Membership fee - \$25.00

NAME: _____

ADDRESS: _____

TOWN: _____

STATE: _____ ZIP: _____

PHONE: _____

EMAIL: _____

Please mail application with payment to:

Lisa Coleman
356 Crescent Avenue
Highland, NY 12528

(Check should be made payable to: Shawangunk Runners)



**Membership for one year - February through January
If application received after December 1st membership
will be considered early renewal for the next year.**