



Membership Application Form

Member Application (please print or type)

Name	
Billing address	
City	
State	
ZIP Code	
Date of Birth	
Telephone (home)	
Telephone (cell)	
E-Mail	

Membership Fee Information

I am applying for membership in the form of:

cash check

Annual Fee \$20	
Two Years \$38	
Total	

Acknowledgement Information

I will abide by all association rules and regulations:

Signature(s)
Date

Please make checks or other gifts payable to:

runhers association
P.O. Box 720627
Oklahoma City, OK 73172

Office Use Only – received:

By:
Date