



# Hiawathaland Trail Association

## Membership Application

Applicant Name \_\_\_\_\_

Spouse \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Web Site Address \_\_\_\_\_

The above named person(s) hereby makes application for membership in the Hiawathaland Trail Association, also known as H.T.A.

As a member, He/She promises to promote and encourage safety, good sportsmanship, protection of the wilderness and wildlife and responsible use of public and private lands while operating on a trail system. He/She also promises to comply with resolutions of the Hiawathaland Trail Association Board of Directors. The Hiawathaland Trail Association is a not for profit organization.

### MEMBERSHIP DUES:

<b>INDIVIDUAL</b>	<b>\$10.00</b>	<b>Annual</b>
<b>BUSINESS</b>	<b>\$35.00</b>	<b>Annual</b>
<b>CLUB / ASSOCIATION / CHAMBER of COMMERCE</b>	<b>\$100.00</b>	<b>Annual</b>

For Additional Information visit: website [www.hiawathaland.org](http://www.hiawathaland.org)  
facebook <https://www.facebook.com/hiawathalandtrailassociation>

Please Make checks payable to: **Hiawathaland Trail Assoc.**

Mail to: **Hiawathaland Trail Assoc., 2425 Ludington Street, Escanaba, MI 49829**

Amount Enclosed \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_