NCWQG Membership Renewal

Please Prin	t	Date:	
Name:			
Address:			
City, State:			
Zip code:			
Phone:			
Email:			
Payment:	Check#		Cash \$
	Dues		\$
	Advertisin	g	\$
	Retreats		\$

Notes:

New Member: Yes

recv'd Membership Kit: YES recv'd Membership Card: YES

Returning Member: Yes Member since:

Please complete this form and send, along with a self-addressed and stamped envelope, to:

Membership/NCWQG P.O. Box 2715 Wenatchee, WA 98807

Make checks payable to: NCWQG

Yearly Dues are \$25.00