



# Westmoreland Heritage Trail Membership Form

Date \_\_\_\_\_

☐ I (We) would like to become a member of the Westmoreland Heritage Trail as indicated below...

☐ I (We) would like to renew my membership in the Westmoreland Heritage Trail as indicated below...

☐ Yearly Individual \$25

☐ Ten-Year Individual \$150

☐ Lifetime Individual \$200

☐ Yearly Family \$30

☐ Ten-Year Family \$250

☐ Lifetime Family \$ 300

☐ Yearly Non-Profit Club, Group or Organization \$50

In addition, I (We) would like to contribute \$ \_\_\_\_\_ to the Trail.

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

Address \_\_\_\_\_

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

Email \_\_\_\_\_

Phone \_\_\_\_\_

Interested in volunteering for the trail? Please  
visit <https://westmorelandheritagetrail.com/volunteers/> to sign up today!

Please make check payable to: **Westmoreland Heritage Trail**

Mail to: **Westmoreland Heritage Trail**

**P.O. Box 184**

**Claridge, PA 15623**