

Central Florida Walkers Membership Application

(Please Print!)

Last: _____ **First:** _____ **MI:** _____

Street Address: _____

City: _____ **State:** _____ **ZIP:** _____

Home Phone: _____ **Work Phone:** _____

Email: _____ **Mobil Phone:** _____

Occupation: _____ **Years in Florida:** _____ **Started Walking:** _____

M/F: _____ **Date of Birth:** / / **Current Age:** _____ **Application Date:** _____

Annual Membership Fee (1 Sep to 31 Aug) **Single (\$15.00)** \$ _____

Or Family (\$20.00) \$ _____

Shirts:

Singlets **Quantity:** _____ **Small x \$16.00 =** \$ _____

_____ **Medium x 16.00 =** \$ _____

_____ **Large x \$16.00 =** \$ _____

_____ **X-large x \$16.00 =** \$ _____

Tee Shirts _____ **Small x \$8.00 =** \$ _____

_____ **Medium x \$8.00 =** \$ _____

_____ **Large x \$8.00 =** \$ _____

_____ **X-large x \$8.00 =** \$ _____

\$2.00 Shirt Shipping and Handling = \$ _____

Grand Total = \$ _____

Make checks payable to “Central Florida Walkers” and mail to:

**Helen Kwiat
1329 Sterling Oaks Dr
Casselberry, FL 32707**