TFRW Membership Form

Please return to: TFRW 515 Capital of Texas Highway, Suite 133, Austin, Texas 78746 512-477-1615

OFFICE USE ONLY

C# _____
BE_____
CE_____

Submission # ___

Date _____ SD # _____ County _____ Club Name_____

Treasurer _____ Address _____ City, Zip _____ Daytime Phone Number (AC) _____

Per Capita Charge - $15.00 per member* _____ ***Members @ $15.00 each*** $ _____

Never report ASSOCIATE (Dual) members

***includes NFRW dues increase**

****Service Charge: $20.00 per club on first submission*** $_____

10 Member minimum to Affiliate

(club service charge includes 1 year subscription to President's Newsletter)

TOTAL $ _____

DUES ARE NOT DEDUCTIBLE FOR FEDERAL INCOME TAX PURPOSES

Last Name (**please print**)	First Name	Husband	Mailing address, City, Zip	(Area code) Home Phone	(Area code) Office Phone	Occupation **(Required)**	Email **(Please Print)**