

# LEHIGH VALLEY CYCLING CLUB (LVCC)

## MEMBERSHIP APPLICATION

Date: \_\_\_\_\_

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

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

e-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

Birthday: \_\_\_\_\_

### Membership Plan:

Individual      \$20 per year

Family      \$35 per year

If Family, please list other family members below:

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To join the LVCC, visit [www.lvcycling.club](http://www.lvcycling.club) and use the “Join LVCC” tab in the main menu, or give this completed form with your cash or check, made out to LVCC, to a ride leader or other club member who has agreed to convey it to the LVCC membership committee.