

## **Membership Application**

		Date:	
Name:			
Parents's na	ame:	( if Junior member )	
Date of Birth	: (Junior members only)		
Address:			
City/State/Zip;			
Phone: Home:	Cell:		
E-mail:			
Recommended			
	(Tracker's Nan	ne)	
How would you like	e your name to appear on yo	ur club name badge:	
Capital Trackers	n with a check for \$40.00 s" to: David Eadie, Memb ne, Springfield, VA, 22152	• •	
For NCT Use: Payment Rcvd:	Badge Ordered:	Badge Rcvd:	