



Become a Member of TWBC

Name: _____

Address: _____

City, State, Zip: _____

Home phone: _____

Cell phone: _____

Email: _____ @ _____

New Member Renewal Address Change

Individual Membership Fee..... \$15

Family Membership Fee \$20

One-time Initiation Fee \$5

Total Membership Fee(s) \$_____

Send your completed form together with a check to:

TWBC Membership
PO Box 112078
Tacoma, WA 98411

Thanks for becoming a member of the TWBC!
We look forward to seeing you on one of our rides.