

VCTC Membership Form

Your membership fee and tax deductible contribution will help VCTC advance the cause of clean, safe, and reliable surface transportation in the Village.

Please print this page, fill in all appropriate information and send it with your payment (payable to "VCTC") to the following address:

VCTC
P.O. Box 409
Village Station
New York, NY 10014
(212) 475-3394
info@villagetrolley.org
www.villagetrolley.org

Name: _____

Company: _____

Address: _____

City/St/Zip: _____

Please Contact me by phone: (____) _____

Annual VCTC Membership Fee: \$ _____
(circle choice and fill in amount at right)

Individual:	\$10	Senior/Student:	\$5
Family:	\$15	Business:	\$25
Supporting:	\$50		

Additional Contribution: \$ _____

TOTAL: \$ _____

How did you hear about VCTC?

