



Sierra Vista Scenic Byway Association  
 P. O. Box 764, North Fork, CA 93643-0764  
 559-683-4636 (Visitor Bureau)  
 info@sierravistascenicbyway.com



## MEMBERSHIP APPLICATION

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: HOME: \_\_\_\_\_ CELL: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

CONTACT PERSON, if Business or Organization: \_\_\_\_\_

- \_\_\_\_\_ STUDENT: \$5
- \_\_\_\_\_ INDIVIDUAL: \$10
- \_\_\_\_\_ FAMILY: \$15
- \_\_\_\_\_ NON-PROFIT ORGANIZATION: \$50
- \_\_\_\_\_ BUSINESS: \$100

I support the efforts of the SIERRA VISTA SCENIC BYWAY ASSOCIATION in enhancing and promoting the Sierra Vista National Scenic Byway. In addition to the above membership dues, I am enclosing a \$\_\_\_\_\_ donation to the Association fund special projects to benefit visitors to the Sierra Vista National Scenic Byway.

Please make checks payable to: SIERRA VISTA SCENIC BYWAY ASSOCIATION

Thank you!

Signature: \_\_\_\_\_

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