

Midwest Division 2011 Application for Membership

Midwest Division of TCA, PO Box 327, South Elgin IL 60177

Name _____ Date _____

Address _____

City _____ State _____ Zip Code _____

Phone # _____

E-Mail Address _____

(Your e-mail address will be used for MWD information only)

Membership Fee \$30.00 covers MWD yearly dues and door fees for all MWD meets.

Family Membership is an additional \$5.00 to the Regular or Annual membership fee. This allows your spouse and any children under 17 years of age free admission

Total Check Amount \$ _____

Family Membership Information:

Spouse (Name) _____

Child (Name) _____ Age _____

Child (Name) _____ Age _____

Child (Name) _____ Age _____

(Children ages 17 and under free - Please List Names and Ages)

MWD Sponsor (Name) _____ TCA# _____



Send completed application with payment to:

Midwest Division TCA
P.O. Box 327
South Elgin, IL 60177