



JOIN NOW!

Send this form with payment to:
Adirondack Mountain Club
Membership Department
814 Goggins Road
Lake George, NY 12845-4117

Name _____

Address _____

Phone _____

E-mail _____

Your e-mail address will not be distributed to outside organizations.

Please enroll me as a member of the chapter I have checked (included in your dues).
For more information on chapter membership see: <http://www.adk.org/chapters/index.aspx>

XX Genesee Valley

Please choose a membership level:

- Individual \$50 Family \$60 Senior (65 and over) \$40
- Senior Family (65 and over) \$50 Student \$40
- Individual Life \$1300 Family Life \$1950

For family memberships only: Spouse Name _____

Child _____ **Birth Date** _____ **Child** _____ **Birth Date** _____

Child _____ **Birth Date** _____ **Child** _____ **Birth Date** _____

Check (US funds) made out to **Adirondack Mountain Club** or **ADK** enclosed **or**

Please bill my Visa Master Card American Express

Credit Card # _____ Exp. Date _____

Signature _____