TWC Triathlon Club

Victoria, BC, Canada

Membership Application Form

Please print this form and send it (**along with $25**) to the following address:

Mailing Address:
TWC
c/o Kellee Drummond, Treasurer
1160 Gerda Road
Victoria, BC, V8Z 2Z4

Name _____

Email _____

Address _____

City _____

Province _____ **Postal Code** _____

Home Phone _____ **Cell Phone** _____

Birthdate _____

Do you want your contact info made available to other members?

Address	Yes ☐	No ☐
Phone	Yes ☐	No ☐
Email	Yes ☐	No ☐

Notes/Comments:

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