



FRIENDS AND COMMUNITY PARTNERS
Enrollment Form

Date: _____

FRIEND ENROLLMENT- \$40 annually

Name: _____

Address: _____

Email: _____

Phone: _____

Instrument or voice: _____

COMMUNITY PARTNER ENROLLMENT- \$100 annually

Business Name: _____

Contact Person: _____

Email: _____

Phone: _____

- **PAYMENT**

- Check is payable to RMTA and can be postal mailed to RMTA Treasurer Lindsay Evans, 100 Justa Rd., Wernersville PA 19565.

WELCOME!

