



**FLORIDA TRAIL BLAZERS, INC.
MEMBERSHIP APPLICATION**

Dedicated to the Creation and Preservation of Equestrian Trails

Single Membership \$15/year _____

New

Family Membership \$25/year _____

Renewal

Name: _____

Address: _____

City: _____

State: _____ **Zip:** _____

Phone #: (Home) _____ **Cell # :** _____

E-mail address: _____

Would you like your info in our Club Directory: **Yes** **No**

I hereby volunteer as a member of Florida Trail Blazers, Inc. to assist in preserving our existing trails and developing new ones on state lands.

Signature: _____ **Date:** _____