



MEMBERSHIP APPLICATION

(Please fill out all information regardless of prior membership)

Single Membership: \$20.00

Name:

Address:

Home Phone:

Cell Phone:

Email Address:

Family Membership: \$30.00

(Includes parent(s) and all children under age 21 at same address)

List **All** Names:

Address:

Home Phone:

Cell Phone:

Email Addresses:

Complete this application along with a check or money order made out to TRORA and mail to: Steve Justice 7544 Whitemarsh Way Hudson, OH 44236