

## Membership Application

Last Name:		First Name:	
Last Name:		First Name:	
Address:		Ziŗ	):
Telephone:	Email:		
New membershi	p		
Renewal			
Please send your check (\$6/person) payable to Nittany Nomads and your application to:			
	Harvey Holter		
	500 E. Marylyn Ave.		
	Apt. H-120		
	State College, PA 168	801-6271	