office use only: Date _____
Chapter _____
Contact _____
Ind Fam

People for Off-Leash Recreation
POLR

Name: _____

Address: _____

_____
city zip code

e-mail: _____

I prefer to receive information by: **e-mail** **US mail** (please circle one)

* Phone: home-_____
day- _____
cell- _____

*phone #s are optional, but please include at least one

Dog(s) name: _____

Yearly dues: Individual $10 (make checks payable to POLR)
Family $15
Extra Donation: _____

Privacy Statement: POLR, a WA non-profit corporation, respects your privacy! We will not make our membership available to any commercial, political, or marketing enterprises ever. Your personal information will not be disclosed to anyone, except as required by state law. We currently do not have tax exempt status with the IRS, so dues and donations are not tax deductible yet.

Please mail form and dues to: POLR
12609 SE 29th St
Bellevue. WA 98005