



# **IHPVA International Human Powered Vehicle Association**

The IHPVA is a corporation organized under the Nonprofit Public Benefit Corporation Law for charitable purposes [Section 501(c)(3)].  
PO Box 30843 • Seattle, WA 98113 USA • Phone 775.455.0990  
Website: [IHPVA.ORG](http://IHPVA.ORG) / [WHPSC.ORG](http://WHPSC.ORG)

## **Annual Membership Form**

This membership is good for one year.

Name \_\_\_\_\_

Business/School \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State \_\_\_\_\_

Country, Zip/Postal code \_\_\_\_\_

Email \_\_\_\_\_

Phone: Work \_\_\_\_\_ Home/Mobile \_\_\_\_\_

Name & Date of Event (if applicable) \_\_\_\_\_

Date of this application \_\_\_\_\_

Please check if this a New Applicationr \_\_\_\_\_ or Annual renewal \_\_\_\_\_.

**Membership Fee: \$35.00 USD**

Payment by: Check \_\_\_\_\_ Credit Card \_\_\_\_\_ Cash \_\_\_\_\_

WHPSC entrants and team members have the option of paying as part of their teams  
WHPSC entry fees. Check here if using this option \_\_\_\_\_.

Select WHPSC payment option: Check \_\_\_\_ Credit Card \_\_\_\_ Cash \_\_\_\_

Please bring a completed hardcopy form to the WHPSC event.

Fee Paid \_\_\_\_\_ USD ; Donation (optional): \_\_\_\_\_ ; Total Amount : \_\_\_\_\_

VISA/Mastercard no.: \_\_\_\_\_

Expiration Date: Month/Year \_\_\_\_\_ 3-digit code \_\_\_\_\_ Zip \_\_\_\_\_

Signature \_\_\_\_\_

Make checks payable to: IHPVA.

Please mail this form and payment to:

IHPVA  
PO Box 30843  
Seattle, WA 98113 USA