



TORRANCE ROSE FLOAT ASSOCIATION
2024/2024 Membership Application
February 1, 2024 to January 31, 2025

MEMBERSHIP

NEW RENEWAL

Interested in volunteering

YES NO

Primary Member Name:

First: _____ Last: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Mobile Phone: _____

Email Address: _____

May Vote and Hold Office

Youth \$10 per Year (Age 13-17)

Individual \$20 per Year (Age 17+)

Couple* \$30 per Year Additional Member Name: _____

Family* \$50 per year Up to 4 people, for each addtl person add \$10

2nd _____ 3rd _____

4th _____ 5th _____

*Couple and family memberships must reside at the same address. Any additional names can be added at the bottom of the form.

May not Vote or Hold Office

Company/Organization:

Service Club/Organization \$100/year (5 people eligible to decorate)

Business \$250/year (10 people eligible to decorate)

Membership dues:

Additional donation: _____

To receive newsletter via USPS -Add \$10.00 for postage _____

Total payment enclosed: _____

Please make your check payable to TRFA and mail with form to:
 Torrance Rose Float Association Membership/4733 Torrance Blve. #234/Torrance, CA 90503

FOR QUESTIONS OR CONCERNS, PLEASE CONTACT: TORRANCEROSEFLOAT@GMAIL.ORG OR CALL: 310.618.2425