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Membership Referral Program

**Add a member to the TCR family, add a month onto your membership.
It's that simple.**

Member's Account Number: _____

Member's Full Name: _____

Email: _____

Phone: _____

Prospective member(s) you are referring:

1. Full Name: _____ Email: _____ Phone: _____

2. Full Name: _____ Email: _____ Phone: _____

3. Full Name: _____ Email: _____ Phone: _____

4. Full Name: _____ Email: _____ Phone: _____