



APPLICATION FOR NEW MEMBERSHIP

PLEASE MAKE CERTAIN ALL SECTIONS ARE COMPLETE BEFORE SUBMITTING

PLEASE PRINT LEGIBLY

Name (Cost of New Membership \$200): _____

Spouse (Cost to add Spouse \$50): _____

Mailing Address: _____

Phone: _____ Email Address: _____

Annual Hours You will commit to Club Charitable Endeavors: _____

Will you chair or participate in a fundraising event once per year: _____

REQUIRED SIGNATURES

Club Member Sponsor: _____ Member 1: _____

Member 2: _____ Member 3: _____

Trustee 1: _____ Trustee 2: _____

Trustee 3: _____

FOR CLUB USE ONLY

Approved of Deferred: _____ Date: _____

Form of Payment: _____ Amount Paid: _____

Accepted by: _____ Date: _____