Membership Application

Click here to email completed form:

Tri Pass Ski Club Post Office Box 11914 Eugene, OR 97440

Name:			Spouse:	
Address:	Zip:		Occupation:	
Home Phone:	Bus. Phone:		Email:	
Your age is between: 25-35 Children's names and ages:	36-50	Over 50		
Please list three Sponsors' that are cu 1 2 3				
Why do you wish to join Tri Pass?				
How would you use the club?				
Do you want to be placed on the Pern				
Do you own or intend to buy a boat?	Yes No If y	yes: Power	Sail	Hobie Cat
Do you water ski? Yes N	o Do you su	rf sail? Yes	No	
Do you intend to use a: Motor Hom	e Travel Trailer	Tent		
What are your hobbies?				
Do you have a particular skill with whi	ch you can volunteer help at	Tri Pass? (Please I	list)	
The initiation fee of \$4,000 is payable annual fees are as follows:	in full upon acceptance of y	our application by th	ne Board of Directo	rs. Current other use and
	Annual Dues	\$200 \$100 \$10) yearly	on there of
This is the financial information at the time in effect at the time you join.	e of application. At the time of			and you would join under the fees
Please ask your sponsor for a copy of the club rules and bylaws? Yes	club rules and bylaws and fam	niliarize yourself and y	our family with them.	Do you agree to comply with the
If you decline an offer of Membership by	· ·		, ,	
For review and approval by the Board of I	Directors please click below to (emaıl completed appli	cation or mail to:	Tri Pass Ski Club P.O. Box 11914 Eugene, OR 97440
Signed:			Date	