

MEMBERSHIP APPLICATION

PO BOX 3504 SHOW LOW, AZ 85902

DATE:	NEW	RENE	WAL	
Printed Name(s):				
Phone(s):		Brass Name Badges (\$5 each)		
Mailing Address:		City:	Zip:	
Ξ-mail Address(s):				
	Single (\$20) (<i>\$5 deduction if gett</i> send club newsletter	ting newsletter by	E-mail)	
May we have birthday	s? (Month Only)			
List any ju	unior members you w	ould like to spons	or (No added fee):	
_	_	•	A	
l	Age:		Age:	
			Age: Age:	
3	Age:	4	Age:	
Signatures:	Age:	4		
3Signatures:Seasonal men	Age:	4 rnate address and	Age: Date:	
3Signatures:Seasonal men	Age:	4 rnate address and City:	Age: Date: months of residency: Zip:	
3Signatures:Seasonal men	Age:	4 rnate address and City:	Age: Date: months of residency: Zip:	