



## MEMBERSHIP APPLICATION FORM

*Please Print Legibly*

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Membership Type: Couple  Single Female  Single Male

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

\*\**(we respect your privacy, your phone number and email address is kept private and is only used to contact you about your membership, it will not be sold or distributed to anyone or any company that distributes email matters.)\*\**

**I have read and received a copy of the Rules and Regulations of Trapeze Club. My signature on this application agrees to all terms of the Membership.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use Only**

Membership Number: \_\_\_\_\_

Amount Paid: \_\_\_\_\_  Cash  Credit Card  Other \_\_\_\_\_

Received By: \_\_\_\_\_

**Haulover Beach Party**