



# 2020 WAHOO CLUB APPLICATION FOR MEMBERSHIP

\_\_\_\_\_ New Membership      \_\_\_\_\_ Renew Annual Membership

## ***Please Check Membership Desired***

MEMBERSHIP TYPE	ONE YEAR (renewed annually)	LIFETIME (one-time payment)
YOUTH (14 and under)	\$15.00 _____	N/A
INDIVIDUAL	\$25.00 _____	\$75.00 _____
COUPLE	\$35.00 _____	\$100.00 _____
FAMILY	\$45.00 _____	\$100.00 _____

Please note your information will NOT be shared with anyone. We will only call in the event there is a problem with sending you an email. Once we receive your membership application we will send you a test email to ensure receipt.

Primary Member Name \_\_\_\_\_  
E-mail \_\_\_\_\_  
Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Other names on your membership \_\_\_\_\_  
\_\_\_\_\_

*Please send the application with a check payable to **Wahoo Club***

*Mailing address: **The Wahoo Club c/o Membership***

**PO Box 221142  
Cleveland OH 44122**

*To use a credit card please fill out this section:*

Credit Card Number: \_\_\_\_\_ Exp \_\_\_\_\_  
Billing Zip Code \_\_\_\_\_ 3 digit Sec. Code \_\_\_\_\_

*We now also accept these forms of payment for membership: **PAYPAL, VENMO***

*To use these please email us for further instructions: **membership@wahooclub.org***

Referred By: \_\_\_\_\_  
Receipt: \_\_\_\_\_