## **WELCOME CLUB MEMBERSHIP FORM 2024**

PLEASE COMPLETE A SEPARATE FORM FOR EACH PARTICIPATING HOUSEHOLD MEMBER.\*

Date:				
First Name	Last Name			
Mailing Address	City		State	Zip
Home Phone	Cell Phone		(Please asterisk pre	eferred contact number)
E-Mail			_	
Formerly from:				
Significant Other's Name			_	
*Please complete a form for \$25/Individual membershi	each household member joint p \$35/Household membership Henderson County, PO Box 12	ning. Mail with o	check payable to	_
Paid with check no	for \$	Date		
Please check one:Memb	er renewalNew member			
I agree that, as a Welcome Club of H for-profit, all-volunteer social organiza travel to and from events/activities. R act in an intentional, reckless or negli	ation. I acknowledge that there are ris isks could include personal injury and	sks and hazards inh	erent in this participa	ation, not limited to
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## We look forward to many memorable moments together!