*2024 Membership Application*

*New Jersey Club and Friends Inc*

[*www.njclubandfriends.com*](http://www.njclubandfriends.com)

*Date\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Are you a Veteran? \_\_\_\_\_\_\_\_*

*Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Are you a Veteran? \_\_\_\_\_\_\_\_*

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

*City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, FL. Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Where did you reside in NJ? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*If not NJ, where?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Are you a permanent Florida resident? Yes\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_*

*If no, how many months are you here? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Who referred you to our Club? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*DUES are $35 PER PERSON which includes a Club Name Badge*

*(your renewal will be $25 per year hereafter)*

*Make your check payable to****: NJ CLUB & FRIENDS***

*\*\*In the memo area of your check, please identify as “DUES”.*

*Mail your checks to membership chairman;*

*Sandi Chance 1862 Batello Drive, VENICE, FL. 34292*

Schance614@gmail.com *(513-673-0586)*

***WELCOME TO THE CLUB***

***See below***

*Name Badge Information*

*Please print CLEARLY --your name as you want it on the name tag*

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City & State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City & State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Examples: John Doe*

*Newark, New Jersey*

*Jane Doe*

*Cleveland, Ohio*