



# FLORIDA PANTHERS BOOSTER CLUB APPLICATION FOR MEMBERSHIP 2024-2025

Only one (1) name per application unless a FAMILY membership  
Membership expires September 30, 2025

Application Date: \_\_\_\_\_

Dues: Adults: \$25.00 each \_\_\_\_\_ Family Membership: Adult \$20.00 each \_\_\_\_\_ Kids 13-17: \$5.00 each \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ / \_\_\_\_\_  
Last First M.I. Month Day

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
\_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address for communications: \_\_\_\_\_

If this is a FAMILY membership, please list names, birth dates and email addresses if they wish to also receive communications from the club.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ Email: \_\_\_\_\_  
Month Day Optional

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ Email: \_\_\_\_\_  
Month Day Optional

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ Email: \_\_\_\_\_  
Month Day Optional

**PLEASE NOTE: MEMBERSHIP APPLICATION IS NOT VALID WITHOUT PAYMENT.**

RETURN THIS APPLICATION WITH THE APPROPRIATE DUES TO -

FLORIDA PANTHERS BOOSTER CLUB

ATTN: FRAN ROBERT

401 NW 2ND AVE

BOCA RATON, FL 33432

DATE - \_\_\_\_\_

AMOUNT PAID - \$ \_\_\_\_\_

CASH CHECK ZELLE

INITIALS \_\_\_\_\_

YOU MAY SEND YOUR MEMBERSHIP DUES USING ZELLE THROUGH YOUR BANK. PLEASE PUT  
"MEMBERSHIP" IN THE NOTES SECTION OF ZELLE PAYMENT

THE EMAIL ASSOCIATED WITH OUR ACCOUNT IS - FLPBCPAYMENT@GMAIL.COM

