



The Tux Club Inc. Membership Application



Home: _____

Cell: _____

Phone Number

Name (Print)

Date of Birth

Address

Marital Status

Spouses Name

City, State, Zip Code

Church Affiliation

Email Address

Affiliation Other Organizations

Employment Status

Affiliation Other Organizations

Reason for Joining the Tux Club Inc. _____

Qualified Voter

Vouching Members Name

Joining Fee

Joining Date

Applicant's Signature

Recording Secretary

Remarks _____
